

PERMIT NO.	CITY OF NEW BEDFORD DATE 9/26/0/	
23132 SFW	VER AND/OR STORM DRAIN PERMIT	
COPTINE DOUGH	ER AND/OR STORWI DRAIN FERMIT	
This certifies that permission is granted to		
	105 54. New Britard, MA 02710	
Property Owner Address	Linios 51. #52	
	and/or storm drain in. Lunce Street	
	application and the City of New Bedford ordinances.	
TYPE OF USE: ☐ RESIDENTIAL ☐ COMME		
If applicant other than actual property owner, attach		
Name 110000+ Bolling	Dart 121A 02747 Tel (508) 902-7800 Work	
Mailing Address 53 Willaur Ave.	bart 121A 02747	
The Bonded Contractor/Drain Layer authorized to	perform this work is: 5th at Francisty Line.	
Hugust Kulk hoe Smitch	(508) 796-3579	
Name	Address Tel.	
Type of Pipe Required:	OF ISSUE auc to lack of non. cover.	
PERMIT EAPIRES ONE YEAR AFTER DATE	OF ISSUE	
	m drain where applicable. Storm water cannot be discharged to a sanitary	
* All work must be inspected and approved by a D	P.W. inspector before backfilling	
	e shared jointly with other building owners, attach copy of Recorded Joint	
Maintenance Agreement.		
Public Works of required plans and supplemental in	ercial Applicants only upon receipt and approval by the Commissioner of formation.	
* In addition, a City-issued Industrial User Disch	arge Permit and/or a Sewer Extension/Connection Permit issued by the	
	equired by the City for Industrial Discharge into the sewer system.	
	Date	
[19] (10] - 10] (10] (10] (10] (10] (10] (10] (10]	Date	
	trance Fee of \$.735.00 where applicable, must accompany this application.	
Bank # Congres Conff Check # 1553	Date: 9/26/01 Receipt # 4/14/4	
Other requirements: Frequencies Only - Vo	COWECT JOHN DITS, Project-Trub Coct =	
50' x \$14.70/4 = \$735,00. Must correct Health Deat before a bandoning		
Septic = ystem: Sewer Tetal = #	35:00	
Connection made to Part of join	tly-shared private line ☐ Yes ☐ No	
□ Storm Drain		
Applicant agrees to abide by the above terms, as well as all pertinent ordinances of the City of New Bedford, and such		
other special rules as the Commissioner of Public	Works may deem necessary	
Lowince D. Worder / core	* Kalin & Soulli	
Commissioner of Public Works	Signature of Property Owner or Representative	
IN	SPECTOR'S REPORT	
	1.090	
INSPECTED BY:	7	
DATE:	0.5:	
COMMENTS:	LEMOS AO ST.	
	45.5	
	3'12'	
□APPROVED □ DISAPPROVED		
LATROYED LIDISAFFRUVED	* *SZ	
	( k- ;	
	0.003	
SIGNATURE	SKETCH PLAN	

# PERMIT NO. 23132



### CITY OF NEW BEDFORD

DATE 9/26/01

## SEWER AND/OR STORM DRAIN PERMIT

Property Owner Address	5 St. New Brotherd MA 07740 Tel. (508) 999-6643
to connect a sewer and/or storm drain located at	mos 5+ #32
Assessor's Plot. 80, Lot. 6.0, to the sewer and	d/or storm drain in Longo Street
to be laid in accordance with the conditions in this app	
TYPE OF USE: ☐ RESIDENTIAL ☐ COMMERI	CAL □ INDUSTRIAL □ OTHER 3306/2
If applicant other than actual property owner, attach L  Name	etter of Authorization from Property Owner.  Tel. (\$\sigma 08\) 997-7800 Word  Ort MA 07747  999-447 Honus
Mailing Address 35 WIIOUF PTVE D	ort MA OCIA!
The Bonded Contractor/Drain Layer authorized to p	perform this work is: 5tub at Property Line.
Name Name	(508) 996 - 3599 Address Tel.
	of issue die to lack of min. cover.
* All work must be inspected and approved by a D.P  * If this connection is to be part of a private service s  Maintenance Agreement.  * Permits can be issued to Industrial and/or Commer  Public Works of required plans and supplemental info  * In addition, a City-issued Industrial User Dischar	shared jointly with other building owners, attach copy of Recorded Joint cial Applicants only upon receipt and approval by the Commissioner of
	Date
	nce Fee of \$.7.35.00where applicable, must accompany this application.
20 MBM(19 12 MBM) (19 12 MBM)	HOTEN MEDICAL ENGRAPHICATE (INTERNATIONAL PROPERTY OF THE PRO
Bank # Compass North Check # 1955	Date: 9/26/01 Receipt # 4/44
50' x \$14.70/A = \$735.00 . MUS Suptice System . Total = \$8	the St Jewer Dets Project - Thub Cost = 4 contact Health Deast before a bandoning. 18:00
Connection made to  Part of jointly  Storm Drain	y-shared private line □ Yes \ No
other special rules as the Commissioner of Public V	ell as all pertinent ordinances of the City of New Bedford, and such Vorks may deem necessary
Commissioner of Public Works	Signature of Property Owner of Representative
INSE	PECTOR'S REPORT
INSPECTED BY: UNKNOWN	
DATE: UNIWOUN	
COMMENTS:	
found sketch in Joe Martin's	
papers. (m) 9/25/03	
77	
□APPROVED □ DISAPPROVED	

31-746

**SIGNATURE** 

SKETCH PLAN



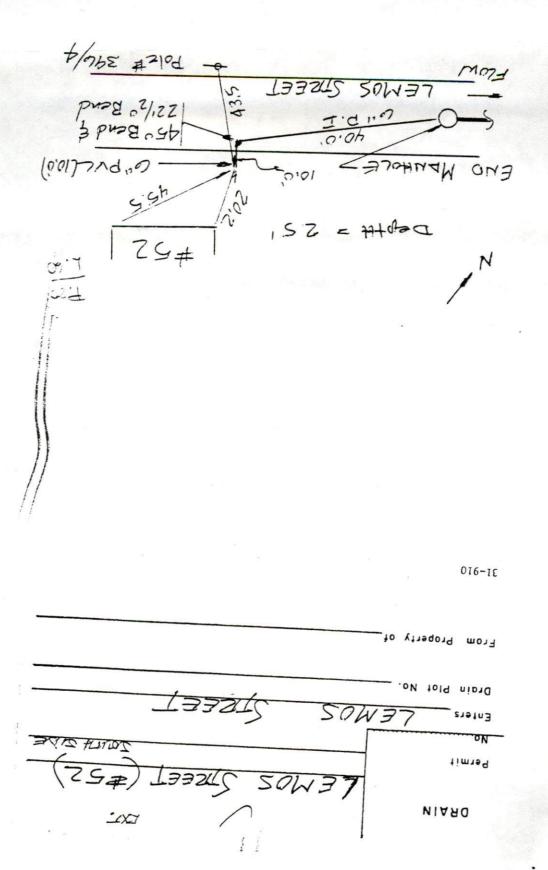
### LAWRENCE D. WORDEN COMMISSIONER

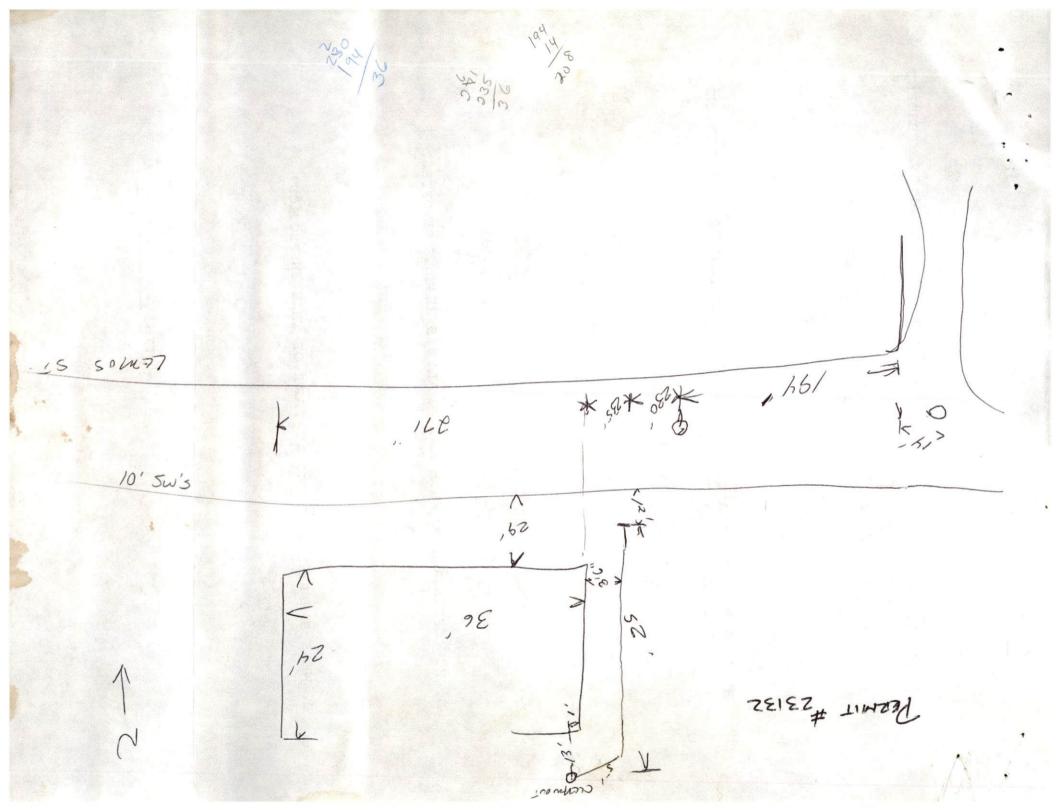
## CITY OF NEW BEDFORD MASSACHUSETTS

DEPT. OF PUBLIC WORKS

133 WILLIAM STREET

·
To Whom It May Concern:
I, MARGERY A. MILLER, being Mailing Address
owner of property located at 52 Lange St.
Plot 80, Lot 60, hereby agree to allow Kobbet Bochmin
Mailing Address O27447 to act on my behalf,
including affixing my signature, in securing permits for:
Sewer/Drain Service Permits Water Service Permits Driveway Installation Permits Sidewalk Installation Permits
I further agree to confirm to, and abide by, all City rules and
regulations applicable to the permits(s) being applied for.
Name Mangery a. Melly
Address
- March 13 2001





26. ARE COMPLIANCE SAMPLES ANALYZED IN-HOUSE OR BY AN INDEPENDENT LABORATORY?

NOT REP

- A. IF INHOUSE, DESCRIBE SAMPLING METHODS AND EQUIPMENT:
- B. INDEPENDENT LABORATORY PROVIDE NAME, ADDRESS, PHONE AND CONTACT AT THE LABORATORY:

- C. ARE SAMPLES COVERED UNDER CHAIN OF CUSTODY?
- D. HOW OFTEN AND TO WHOM ARE ANALYSIS RESULTS REPORTED?
- E. WERE SAMPLES COLLECTED AS PART OF THIS INSPECTION?

YES

INSPECTED BY:

SIESZKA

DATE 7/28/99

TIME 930 A.N