

PERMIT NO.

23268



CITY OF NEW BEDFORD

DATE.....8-5-02

SEWER AND/OR STORM DRAIN PERMIT

(ARMAND BRODEUR)

This certifies that permission is granted to
 BRODEUR FAMILY LIMITED PARTNERSHIP 513 PURCHASE ST. N.B. MA 02745
 Property Owner Address Tel. (508) 995-1766

to connect a sewer and/or storm drain located at 495 CHURCH ST. (U.S.) 540' S. 1/2 Port Ave
 Assessor's Plot 126, Lot 196, to the sewer and/or storm drain in CHURCH Street

to be laid in accordance with the conditions in this application and the City of New Bedford ordinances.

TYPE OF USE: ☐ RESIDENTIAL ☒ COMMERICAL ☐ INDUSTRIAL ☐ OTHER

If applicant other than actual property owner, attach Letter of Authorization from Property Owner.

RECEIVED
OCT 21 2002
 DEPT. OF PUBLIC WORKS
 NEW BEDFORD, MASS

Name.....Tel.....

Mailing Address.....

The Bonded Contractor/Drain Layer authorized to perform this work is:

TBCI
 Name Address Tel.

Type of Pipe Required: PVC SDR 35

PERMIT EXPIRES ONE YEAR AFTER DATE OF ISSUE

- * Requires separate connections for sewage and storm drain where applicable. Storm water cannot be discharged to a sanitary sewer.
- * All work must be inspected and approved by a D.P.W. inspector before backfilling.
- * If this connection is to be part of a private service shared jointly with other building owners, attach copy of Recorded Joint Maintenance Agreement.
- * Permits can be issued to Industrial and/or Commercial Applicants only upon receipt and approval by the Commissioner of Public Works of required plans and supplemental information.
- * In addition, a City-issued Industrial User Discharge Permit and/or a Sewer Extension/Connection Permit issued by the Commonwealth of Massachusetts D.E.P. shall be required by the City for Industrial Discharge into the sewer system.

Industrial User Discharge Permit No. N/A Date.....

Comm. Mass. Sewer Conn./Ext. Permit No. N/A Date.....

A Filing and Inspection Fee of \$150.00, plus an Entrance Fee of \$..... where applicable, must accompany this application.

Bank # CITIZENS BANK Check # 1178 Date: 8-5-02 Receipt # 4385

Other requirements: LOTS MUST BE COMBINED

FLOWABLE FILL MUST BE USED IN CITY LAYOUT

☐ Sewer
 Connection made to Part of jointly-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

.....
 Commissioner of Public Works

.....
 Signature of Property Owner or Representative

INSPECTOR'S REPORT

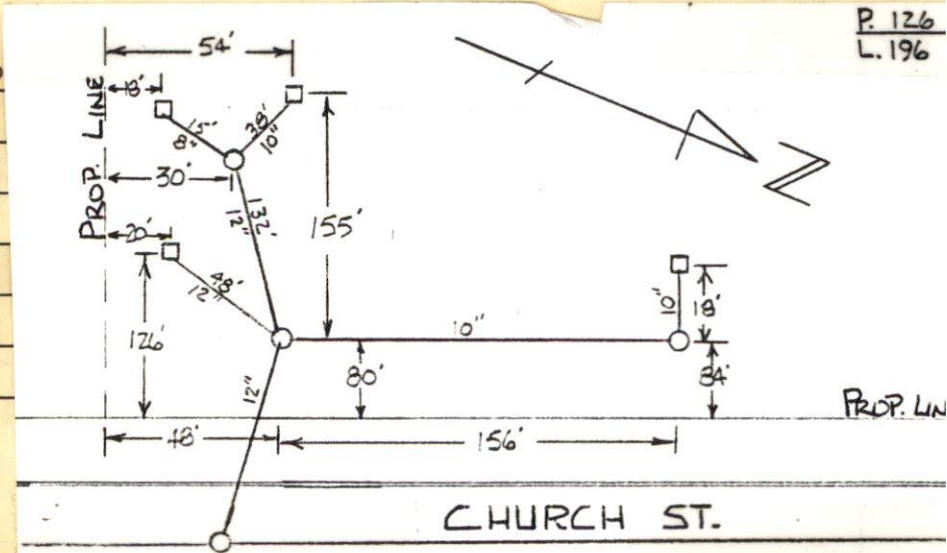
INSPECTED BY: KEN REBELLO
 DATE: 9/10/02
 COMMENTS:

.....

☒ APPROVED ☐ DISAPPROVED

Ken Rebello

SIGNATURE



SKETCH PLAN

979 1521

PERMIT NO.

23268



CITY OF NEW BEDFORD

DATE.....8-5-02.....

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(ARMAND BRODEUR)

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BRODEUR FAMILY LIMITED PARTNERSHIP 513 PURCHASE ST. N.B. MA 02745
Property Owner Address Tel. (508) 995-1766

to connect a sewer and/or storm drain located at.....495 CHURCH ST.....

Assessor's Plot.....126....., Lot.....196....., to the sewer and/or storm drain in.....CHURCH..... Street

to be laid in accordance with the conditions in this application and the City of New Bedford ordinances.

TYPE OF USE: ☐ RESIDENTIAL ☒ COMMERICAL ☐ INDUSTRIAL ☐ OTHER

If applicant other than actual property owner, attach Letter of Authorization from Property Owner.

Name.....Tel.....

Mailing Address.....

The Bonded Contractor/Drain Layer authorized to perform this work is:

~~SEB~~ Green Construction 167 Braley Rd Rochester MA 508-763-2546
Name Address Tel.

Type of Pipe Required: PVC SDR 35

PERMIT EXPIRES ONE YEAR AFTER DATE OF ISSUE

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Connection made to

☒ Storm Drain

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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

.....ANDREW D. WOODMAN.....
Commissioner of Public Works

.....Armand Brodeur.....
Signature of Property Owner or Representative

BUILDING PERMIT ISSUED
BY J. ROZA
LOTS TO BE COMBINED

INSPECTOR'S REPORT

INSPECTED BY:.....

DATE:.....

COMMENTS:.....

.....

.....

.....

.....

☐ APPROVED

☐ DISAPPROVED

SIGNATURE

SKETCH PLAN



City of New Bedford, Massachusetts
Building Department
Application for Plan Examination
and Building Permit

FOR BUILDING DEPT. USE

DATE RECEIVED: 7/19/02

RECEIVED BY: [Signature]

ISSUED BY: [Signature]

IMPORTANT — COMPLETE ALL ITEMS — MARK BOXES WHERE APPLICABLE — PRINT

496-513 Church St.
(AT LOCATION) (NO) (STREET)
BETWEEN TARKIN HILL Rd AND WOOD ST.
(CROSS STREET)
PLOT 136 LOT 196 DISTRICT 1st B ACCEPTED STREET 4th
PLANS FILED ☒ YES ☐ NO

II. TYPE AND COST OF BUILDING — all applicants complete parts A through D — PRINT

A. TYPE OF IMPROVEMENT

- 1 ☐ New Building
2 ☒ Addition (If residential, enter number of new housing units added, if any, in Part D, 14)
3 ☐ Alteration (If residential, enter number of new housing units added, if any, in Part D, 14)
4 ☐ Repair, replacement
5 ☐ Demolition (If multifamily residential, enter number of units in building in Part D, 14, if non-residential, indicate most recent use checking D-18 - D-32)
6 ☐ Moving (relocation)
7 ☐ Foundation only

D1. PROPOSED USE — For demolition most recent use

Residential

- 13 ☐ One family
14 ☐ Two or more family — Enter number of units
15 ☐ Transient hotel, motel, or dormitory — Enter number of units
16 ☐ Garage
17 ☐ Carport
18 ☐ Other — Specify

Nonresidential

- 19 ☐ Amusement, recreational
20 ☐ Church, other religious
21 ☐ Industrial
22 ☐ Parking garage
23 ☐ Service station, repair garage
24 ☐ Hospital, institutional
25 ☐ Office, bank, professional
26 ☐ Public utility
27 ☐ School, library, other educational
28 ☐ Stores, mercantile
29 ☐ Tanks, towers
30 ☐ Funeral homes
31 ☐ Food establishments
32 ☒ Other — Specify 5-2 Warehouse

B. OWNERSHIP

- 8 ☒ Private (individual, corporation, nonprofit institution, etc.)
9 ☐ Public (Federal, State, or local government)

D2. Does this building contain asbestos?

☐ YES ☐ NO If yes complete the following:

Name & Address of Asbestos Removal Firm:

Submit copy of notification sent to DEQE and the State Dept. of Labor & Industries and results of air sample analysis after asbestos removal is completed.

C. COST

10. Cost of construction \$ 250,000 (omit cents)
To be installed but not included in the above cost
a. Electrical
b. Plumbing
c. Heating, air conditioning
d. Other (elevator, etc.)
11. TOTAL VALUE OF CONSTRUCTION 250,000
12. TOTAL ASSESSED BLDG. VALUE.....

D3. Non-residential — Describe in detail proposed use of buildings, e.g., food processing plant, machine shop, laundry building at hospital, elementary school, secondary school, college, parochial school, parking garage for department store, rental office building, office building at industrial plant. If use of existing building is being changed, enter proposed use.

One Story Warehouse to store Drapery, millwork & lumber

III. SELECTED CHARACTERISTICS OF BUILDING —

For new buildings complete part E through L. For demolition, complete only parts G, H & I.
For all others, (additions, alterations, repair, moving, foundation), complete E through L.

E. PRINCIPAL TYPE OF FRAME

- 33 ☐ Masonry (wall bearing)
34 ☐ Wood frame
35 ☒ Structural steel
36 ☐ Reinforced concrete
37 ☐ Other — Specify

G. TYPE OF SEWAGE DISPOSAL

- 43 ☒ Public or private company
44 ☐ Private (septic tank, etc.)

H. TYPE OF WATER SUPPLY

- 45 ☒ Public or private company
46 ☐ Private (well, cistern)

J. DIMENSIONS

- 53 Number of stories
54 Height
55 Total square feet of floor area, all floors based on exterior dimensions
56 Building length
57 Building width
58 Total sq. ft. of bldg. footprint
59 Front lot line width
60 Rear lot line width
61 Depth of lot
62 Total sq. ft. of lot size
63 % of lot occupied by bldg. (58 ÷ 62)
64 Distance from lot line (front)
65 Distance from lot line (rear)
66 Distance from lot line (left)
67 Distance from lot line (right)

F. PRINCIPAL TYPE OF HEATING FUEL

- 38 ☐ Gas
39 ☐ Oil
40 ☐ Electricity
41 ☐ Coal
42 ☒ Other — Specify Unheated

I. TYPE OF MECHANICAL

- Is there a fire sprinkler system?
47 ☐ YES 48 ☒ NO
Will there be central air conditioning?
49 ☐ Yes 50 ☒ No
Will there be an elevator?
51 ☐ Yes 52 ☒ No

One
24' H
50,500
165'
100'
165' x 100' = 16,500 sq ft
40' x 30' = 1,200 sq ft
30' x 30' = 900 sq ft
193,000 sq ft
26%
85'
150' x 7'
100' x 10'
3,000 sq ft

OTHER APPLICABLE REVIEWS

K. FLOODPLAIN

Is location within flood hazard area? yes no

If yes, zone : _____ and base elevation _____

L. WETLANDS PROTECTION

Is location subject to flooding? NoIs location part of a known wetland? NoHas local conservation commission reviewed this site? No

IV. IDENTIFICATION - ALL APPLICANTS - PLEASE PRINT

OWNER OR LESSEE NAME	MAILING ADDRESS	ZIP CODE	TELEPHONE NO.
BRODEUR REALTY TRUST	513 CHURCH ST.		995-1766
CONTRACTOR NAME	MAILING ADDRESS	ZIP CODE	TELEPHONE NO.
CARL BORDINO & SONS INC.	13 Industrial Dr	003019	758-4915
	Mattaponi 02739		
ARCHITECT NAME	MAILING ADDRESS	ZIP CODE	TELEPHONE NO.
Good Beauty Design	13 Industrial Dr	003019	758-4915
Hemant Mehta	" "	" "	758-4915
SIGNATURE OF OWNER	APPLICANT SIGNATURE	DATE	
Ernest P. Brodeur	John F. Bordino	7/8/02	

Omission of reference to any provision shall not nullify any requirement of this code nor exempt any structure from such requirement.

The applicants understands and warrant that they will comply with all pertinent federal and state statutes, local ordinances and all federal, state, and local regulations, including those of the Architectural Barriers board, Department of Environmental Protection Agency and may be forwarded for review to all pertinent local city agencies which may express specific concerns. It is understood that the issuance of a permit shall not serve as an acceptance or acknowledgment of compliance nor exempt any structure from such requirement. The permit shall be a license to proceed with the work and shall not be construed as authority to violate, cancel, or set aside any of the provisions of the State Building Code or local code of ordinances, except as specifically stipulated by modification or legally granted variation in accordance with Section 122.0 of State Building Code or local code of ordinances.

I have read the above and sign under pain and penalty of perjury as to the truth of all of the information and statements contained in sections I through IV of this application.

John F. Bordino 13 Industrial Dr. Mattaponi, Ne 02739
 Applicant's Signature Address City 758-4915

IX- HOMEOWNER LICENSE EXEMPTION**Supplement #1**

The current exemption for "homeowner" was extended to include owner-occupied dwellings of two units or less and to allow such homeowners to engage an individual for hire who does not possess a license, provided that the owner acts as supervisor. (State Building Code Section 110.5)

DEFINITION OF HOMEOWNER:

Person(s) who own a parcel of land on which he/she resides or intends to reside, on which there is, or is intended to be, a one to two family dwelling, attached or detached structures accessory to such use and/or farm structures. A person who constructs more than one home in a two-year period shall not be considered a homeowner. Such "homeowner shall submit to the Building Official, on a form acceptable to the Building Official, that he/she shall be responsible for all such work performed under the building permit. (Section 110.5)

The undersigned "homeowner assumes responsibility for compliance with the State Building Code and other applicable codes, ordinance, rules and regulations, and will comply with the City of New Bedford Building Department minimum inspection procedures and requirements.

HOMEOWNERS SIGNATURE _____

X. CONSTRUCTION DEBRIS DISPOSAL**Supplement #2**

In accordance with provisions of Massachusetts General Law C40, S54, debris resulting from this work shall be disposed of in a properly licensed solid waste disposal facility as defined by Massachusetts General Law C111, S150A

The debris will be disposed of in: Fraser Disposal (Location of Facility)

Signature of Permit Applicant _____

Date 7/8/02**XI. HOME IMPROVEMENT CONTRACTOR LAW AFFIDAVIT**

(Residential Use Only) Supplement to Permit Application

Supplement #3

MGLc. 142 A requires that the "reconstruction, alteration, renovation, repair, modernization, conversion, Improvement, removal, demolition, or construction of an addition to any pre-existing owner-occupied building containing at least one but not more than four dwelling units... or to structures which are adjacent to such residence of building" be conducted by registered contractors, with certain exceptions, along with other requirements.

Type of Work: _____ Est. Cost _____

Address of Work _____

Owner Name: _____ Date of Permit Application: _____

I hereby certify that: Registration is not required for the following reason(s):

_____ Work excluded by law _____ Job under \$1,000 _____ Building not owner-occupied _____ Owner obtaining own permit

Other (specify) _____

Notice is hereby given that:

OWNERS OBTAINING THEIR OWN PERMIT OR EMPLOYING UNREGISTERED CONTRACTORS FOR APPLICABLE HOME IMPROVEMENT WORK DO NOT HAVE ACCESS TO THE ARBITRATION PROGRAM OF GUARANTY FUND UNDER MGLC. 142A.

signed under penalties of perjury:

I hereby apply for a permit as the agent of the owner:

Date _____

Contractor Signature _____

Registration No. _____

OR:

Notwithstanding the above notice, I hereby apply for a permit as the owner of the above property:

Date _____

Owner Signature _____

XII. BUILDING COMMISSIONERS REVIEW COMMENTS AND CONDITIONSC. Building Permit Rejected ☐

Rejection Date _____ 20 _____

Fee \$

3520

Reason For Rejection:

Permit #

1162-02

Comments and Conditions:

BUILD 165'x100' ADDITION J-2 USE

Signed _____

Date: 7/19 20 02

Title _____

Robert Tuthill
Building Commissioner

Not valid unless signed (not stamped) by Building Commissioner

V. OTHER JURISDICTION APPROVALS AND NO
APPROVAL CHECK DAT

Electrical
Plumbing
Fire Department
Water
Planning
Conservation
Public Works
Health
Licensing
Other

No. **10402**

City of New Bedford
Bill for Building Permit

Date 7/19/02 Issued by JOHN KIZA

Name WILKING LITE INC

Address 113 CHURCH ST.

Permit # 111.2-02 9905

VI. ZONING REVIEW

DISTRICT: _____ USE: _____

FRONTAGE: _____ LOT S _____

SETBACKS: _____

FRONT: _____ LEFT SIDE: _____

PERCENTAGE OF LOT COVERAGE PRIMARY B
VARIANCE HISTORY

VII. WORKER'S COMPENSATION INSURANCE A

I, _____
(licensee/permittee) with a principal place of business/reside

(City/State/Zip) do hereby certify, under the pains and penalties

[] I am an employer providing worker's compensation c

Description/Calculations

ADD 2520

Fee 3520 Check # 49-97

0001-241-44300-000

Make Check Payable to City of New Bedford

Insurance Company

[] I am a sole proprietor and have no one working for r

[] I am a sole proprietor, general contractor, or homeo
have the following worker's compensation insurance poli

Name of contractor

Insurance Company/policy number

Name of contractor

Insurance Company/policy number

[] I am a homeowner performing all the work myself.

NOTE: Please be aware that while homeowners who employ persons to do maintenance, construction or repair work on a dwelling of not more than three units in which the homeowner also resides or on the grounds appurtenant thereto are not generally considered to be employers under the Workers' Compensation Act (GL. C. 152, sect. 1(5)), application by a homeowner for a license or permit may evidence the legal status of an employer under the Workers' Compensation Act.

I understand that a copy of this statement will be forwarded to the Department of Industrial Accidents' Office of Insurance for coverage verification and that failure to secure coverage as required under Section 25A of MGL 152 can lead to the imposition of criminal penalties consisting of a fine of up to \$1500.00 and/or imprisonment of up to one year and civil penalties in the form of a Stop Work Order and a fine of \$100.00 a day against me.

Signed this July day of July, 20 02