



PERMIT NO.

23476

CITY OF NEW BEDFORD
SEWER AND/OR STORM DRAIN PERMIT

DATE 10/14/03

EXP. 10/14/04

This certifies that permission is granted to

Alcira Matias 4038 Acushnet Ave. NB, MA 508-998-5984
Property Owner Address Tel.

To connect a sewer and/or storm drain located at 4038 Acushnet Ave.

Assessor's Plot 136 Lot 327, to the sewer and/or storm drain in Acushnet Ave. Street

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

TYPE OF USE: RESIDENTIAL COMMERCIAL INDUSTRIAL OTHER 330 GPD

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:

Antone Medeiros 318 Alden Rd. Fairhaven 508-993-3609

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.I. 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 Infrastructure 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. Date

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

A Filing and Inspection Fee of \$150, plus an Entrance Fee of \$330 where applicable, must accompany this application.

Bank# First Citizens Check# 2458 Date 10/14/03 Receipt# 4757

Other requirements: Insp. Only - Connection to Stub at Prop. Line

Connection made to Sewer 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 Infrastructure and/or City Engineer may deem necessary

Duarte M. Andrade Acting City Engineer Alcira Matias Signature of Property Owner or Representative

INSPECTOR'S REPORT

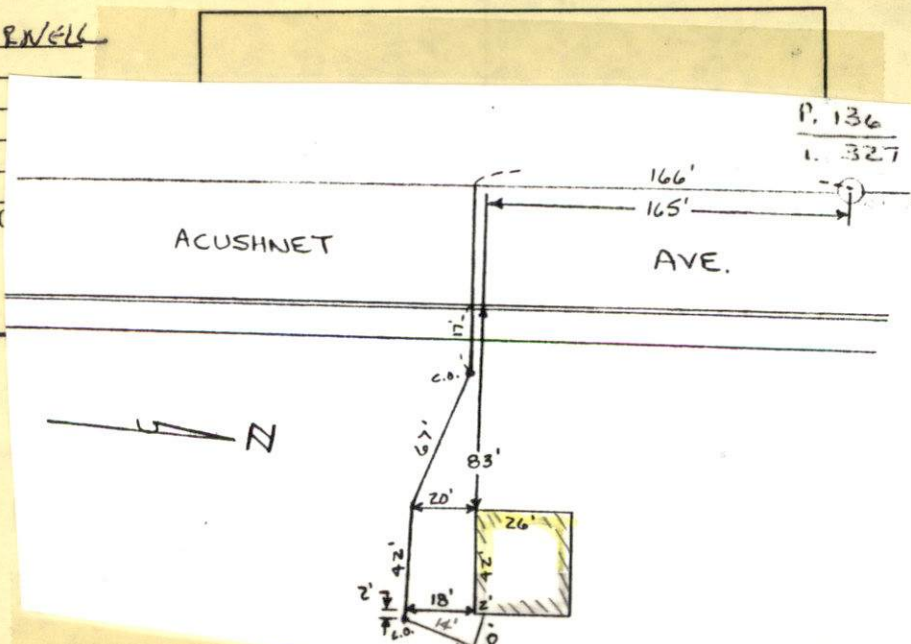
INSPECTED BY: KEVIN J CORNELL

DATE: 11-18-03

COMMENTS:

APPROVED

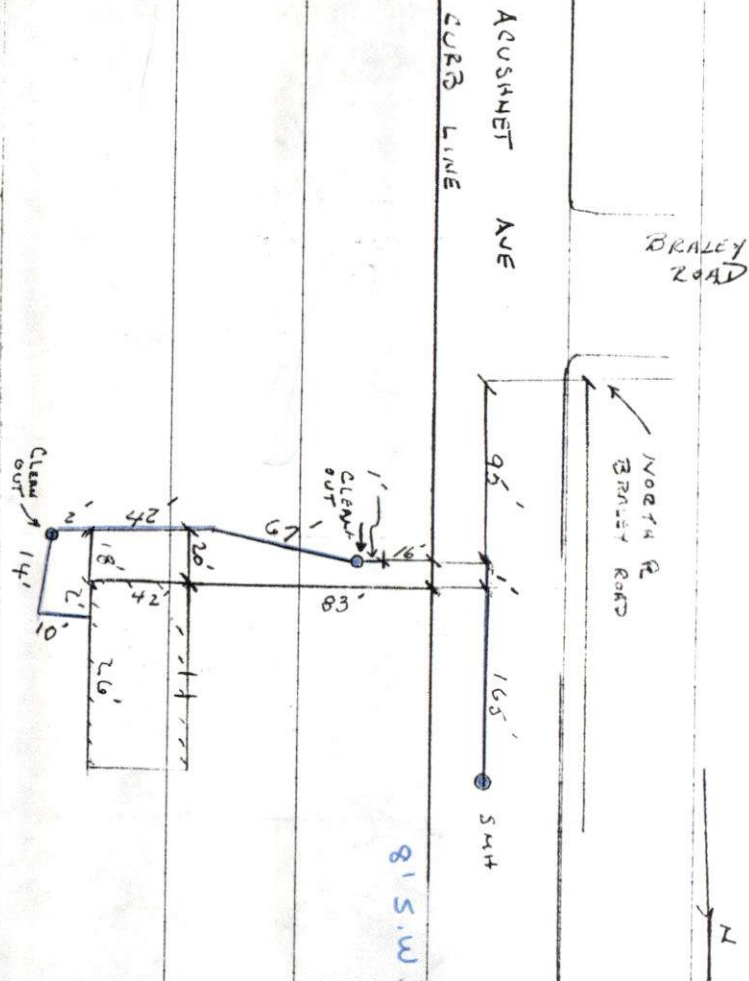
DISAPPROVED

Kevin J Cornell
SIGNATURE

(43) 50

PERMIT # 23476

TONY MEDEIROS CONTRACTOR
508-993-3609





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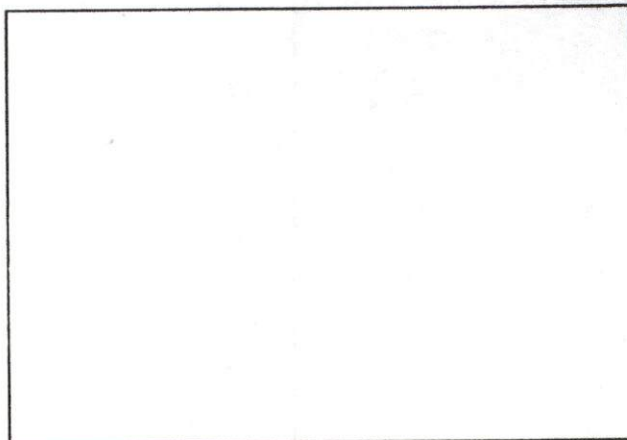
DATE:

COMMENTS:

APPROVED

DISAPPROVED

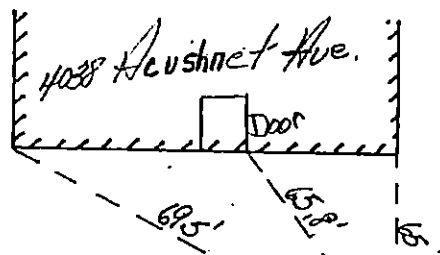
SIGNATURE



SKETCH PLAN

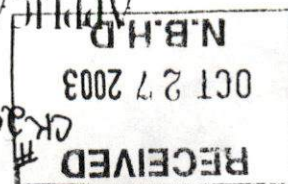
- ① GIVE STREET NAME
- ② " HOUSE NUMBER
- ③ SHOW NORTH ARROW.

ASHLEY, DAVID & JACQUELINE



No. 04-12

Receipt # 0008



COMMONWEALTH OF MASSACHUSETTS

Board of Health, NEW BEDFORD, MA.

APPLICATION FOR DISPOSAL SYSTEM CONSTRUCTION PERMIT

Application for a Permit to Construct () Repair () Upgrade () Abandon () Individual Components () Complete System ()

Location	4038 ACUSHNET AVE	Map/Parcel#	136	Lot#	327
Installer's Name		Designer's Name	UNKNOWN	Address	no plan on file
Telephone#		Telephone#	508 998 5984	Telephone#	
Address		Address	same	Address	
Owner's Name	MARIO N MATIAS	Telephone#		Telephone#	

Type of Building RESIDENTIAL Lot Size _____ sq. ft.
Dwelling - No. of Bedrooms _____
Other - Type of Building _____
Other Fixtures _____
Design Flow (min. required) _____ gpd Calculated design flow _____ gpd
Plan: Date _____ Number of sheets _____
Revision Date _____
Description of Soil(s) _____
Soil Evaluator Form No. _____ Name of Soil Evaluator _____ Date of Evaluation _____

DESCRIPTION OF REPAIRS OR ALTERATIONS

Abandon septic system
DPW permit No. 23476 dated 10-14-03 (copy attached)

The undersigned agrees to install the above described Individual Sewage Disposal System in accordance with the provisions of TITLE 5 and further agrees to not to place the system in operation until a Certificate of Compliance has been issued by the Board of Health.

Signed see DPW permit Date _____
Inspections _____

No. 04-12

COMMONWEALTH OF MASSACHUSETTS

Board of Health, NEW BEDFORD, MA.

CERTIFICATE OF COMPLIANCE

Description of Work: ☐ Individual Component(s) ☒ Complete System

The undersigned hereby certify that the Sewage Disposal System: Constructed () Repaired () Upgraded () Abandoned ()

by: MARIO MATIAS
at 4038 ACUSHNET AVE, N.B.
has been installed in accordance with the provisions of 310 CMR 15.00 (Title 5) and the approved design plans/as-built plans relating to application No. 23476, dated 10/14/03. Approved Design Flow _____ (gpd)
Installer: MEDEROS CONSTRUCTION 318 Alden Rd, Fairhaven MA 508 993-3609
Designer: N/A Inspector: William Blackburn Date: Nov 19 2003

The issuance of this permit shall not be construed as a guarantee that the system will function as designed.

No. 04-12

COMMONWEALTH OF MASSACHUSETTS

Board of Health, NEW BEDFORD, MA.

DISPOSAL SYSTEM CONSTRUCTION PERMIT

Permission is hereby granted to: Construct () Repair () Upgrade () Abandon () an individual sewage disposal system

at 4038 ACUSHNET AVE
Disposal ~~System~~ Construction Permit No. 23476, dated 10/14/03.

Provided: Construction shall be completed within three years of the date of this permit. All local conditions must be met.

COPY

FF# 50.00 (to be paid)

FF# 50.00

COPY

FF# 50.00
6628 10/27/0

- ① GIVE STREET NAME
- ② " HOUSE NUMBER
- ③ SHOW NORTH ARROW.

ASHLEY, DAVID & JACQUELINE

sewer permit 23476

