

CITY OF NEW BEDFORD SEWER AND/OR STORM DRAIN PERMIT

DATE 9 20 07

24009 This certifies that permission is granted to formerly Cladys Lomas 2237 Acushnet Ave NB 508 965 Tel. 225'5. Jonio 5+. (#2237) **Property Owner** Address To connect a sewer and/or storm drain located at. Sewer line capped in side property To be laid in accordance with the conditions in this application and the City of New Bedford ordinances. FLOW 330 G.P.D. COMMERCIAL **INDUSTRIAL** TYPE OF USE: \(\text{RESIDENTIAL} \) If applicant other than actual property owner, attach Letter of Authorization from Property Owner. Name Ralah Chip Mulford Tel 508-965-8355.

Mailing Address P Bak Fairhaven MA The Bonded Contractor/Drain Layer authorized to perform this work is: Blant Homes 158 Ma Combs Blud NB 508-965-8355 Name Address Type of Pipe Required: S.D.R. 3.5. P.V.C. 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. A Filing and Inspection Fee of \$1.50., plus an Entrance Fee of \$...... where applicable, must accompany this application. Date Check#

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 Infrastructure and/or City Engineer may deem necessary

Acting City Engineer mon

Signature of Property Owner or Representative

INSPECTOR'S REPORT

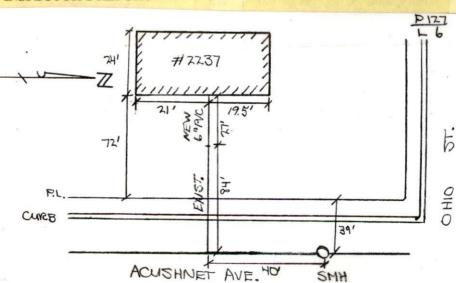
COMMENTS:

APPROVED

DISAPPROV

SIGNATURE

INSPECTED BY



72 6 PVE 84 CX15T 100



PERMIT NO.

CITY OF NEW BEDFORD SEWER AND/OR STORM DRAIN PERMIT

DATE 9 20 07

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This certifies that permission is granted to
Cladys Lamas 2237 Acushnet Ave NB 508 965-8355 Property Owner Address Acushnet Ave CWS) 725 5.xohio St. (#2237)
Property Owner Address Acushul Ane. (WS) 725' 5. X Ohio St. (#2237) To connect a sewer and/or storm drain located at. Sewer linecapped insideproperty
Assessor's Plot .1.2.7Lot, to the sewer and/or storm drain in
To be laid in accordance with the conditions in this application and the City of New Bedford ordinances. TYPE OF USE; RESIDENTIAL COMMERCIAL INDUSTRIAL FLOW 3.3 © G.P.D.
If applicant other than actual property owner, attach Letter of Authorization from Property Owner. Name. Ralph. Chip. Multiped Tel. 508-945-8355 Mailing Address. P. O. B. C. Faichausen M. R. The Bonded Contractor/Drain Layer authorized to perform this work is: Long. Bluilt. Homes 158 Mc Combs. Blud. N.B. 508-945-8355 Name Address Type of Pipe Required: 5. D. R. 3.5. P. V.C.
PERMIT EXPIRES ONE YEAR AFTER DATE OF ISSUE
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INSPECTOR'S REPORT
INSPECTED BY: Bas Brehef DATE: 9/29/07 COMMENTS: in front yard. APPROVED DISAPPROVED APPROVED APPROVED
SIGNATURE

SKETCH PLAN

GYETCH ATTACHED



PERMIT NO.

CITY OF NEW BEDFORD SEWER AND/OR STORM DRAIN PERMIT

DATE 9 20

4009	- CIANIO ST
This certifies that permission is granted to	S. 205 - SKOM
Chis certifies that permission is granted to Chadys Lomas 2237 Acush no Property Owner Address	
To connect a sewer and/or storm drain located atS.ewerlin	re capped inside property
Assessor's Plot .1.2.7Lot, to the sewer and/or storm d	rain in Acushnet Street
To be laid in accordance with the conditions in this application and a CYPE OF USE; RESIDENTIAL COMMERCIAL	the City of New Bedford ordinances. INDUSTRIAL FLOW 330 G.P.D.
Long Blilt. Homes 158 Mc Combs.	Tel 508-165-8355
PERMIT EXPIRES ONE YEAR AFTER DATE OF ISSUE	
Public Infrastructure of required plans and supplemental in In addition, a City-issued Industrial User Discharge Permit Commonwealth of Massachusetts D.E.P. shall be required Industrial User Discharge Permit No	control before backfilling. Sointly with other building owners, attach copy of Recorded colicants only upon receipt and approval by the Commissioner of and/or a Sewer Extension/Connection Permit issued by the by the City for Industrial Discharge into the sewer system. Date
Applicant agrees to abide by the above terms, as well as all other special rules as the Commissioner of Public Infrastructural City Engineer Acting City Engineer	pertinent ordinances of the City of New Bedford, and such cture and/or City Engineer may deem necessary Signature of Property Owner or Representative
INSPECTO	R'S REPORT
INSPECTED BY: DATE: COMMENTS:	
APPROVED DISAPPROVED	
SIGNATURE	

SKETCH PLAN

Inspector's Copy

PERMIT NO. 24009



CITY OF NEW BEDFORD SEWER AND/OR STORM DRAIN PERMIT

DATE 9 20 07

This certifies that permission is granted to
Gladys Lomas 2237 Acushnet Ave NB 508 965-835. Property Owner Address Tel.
To connect a sewer and/or storm drain located at. Sewez. linecapped in sideproperty
Assessor's Plot 1.2.7. Lot. 4, to the sewer and/or storm drain in
Fo be laid in accordance with the conditions in this application and the City of New Bedford ordinances. FYPE OF USE; RESIDENTIAL COMMERCIAL INDUSTRIAL FLOW 330 G.P.D.
f applicant other than actual property owner, attach Letter of Authorization from Property Owner. Name. Ralph. Chip. Multiple Tel. 508-965-8355 Mailing Address. P. D. B.c.X. Faichaven. M. A. The Bonded Contractor/Drain Layer authorized to perform this work is: Long. Blill. Hames 158 Mc Comb. S. Bluck. N. B. 508-965-835 Name. Address. Tel. Type of Pipe Required: 5. D. R. 3. 5. P. V. C.
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Duante M. Andrade Signature of Property Owner or Representative
Acting City Engineer mn Signature of Property Owner or Representative
INSPECTOR'S REPORT
INSPECTED BY:
DATE: COMMENTS:
APPROVED DISAPPROVED
SIGNATURE

SKETCH PLAN



Ronald Labelle Commissioner

Duarte M. Andrade, Acting City Engineer

CITY OF NEW BEDFORD MASSACHUSETTS

D.P.I. -Engineering Division 1105 Shawmut Ave.

New Bedford, Ma. 02746

Tel: 508-991-6150 Fax: 508-961-3054

10 whom it May Concern:
I CLAPY LONG OF FORME 2237 AWSHUT AVE NB, being (Name) (Mailing Address)
Owner of property located at former 2237 Acushnet Ave.
Plot 127, Lot 6, hereby agree to allow (Name)
POBOX 817 Fair haven, to act on my behalf including affixing my (Mailing Address)
signature in securing permit for:
Sewer/Drain Service Permits Water Service Permits Driveway Installation Permits Sidewalk Installation Permits
I further agree to conform to, and abide by, All City rules and ask regulations applicable to the permit (s) being applied for:
Name Skadys Comas
ERNERLY 2237 ACCUMENT AVE NB

Date

Telephone number

-FORM H-NOTICE OF ERECTION OF NEW STRUCTURE LINE & GRADE

YOU WALL OF THE STATE OF THE ST
LOCATION: 2327 (Clustenet ave
PLOT: 127 LOT 6 BUILDING SIZE 24 X US
TYPE OF BITT DIVIC / 1944) TIME
USE shell faculty
DERI DEL CENTRO DE LA CONTRA DEL CONTRA DE LA CONTRA DEL CONTRA DE LA CONTRA DEL CONTRA DE LA CONTRA DEL CONTRA DE LA CONT
DEPARTMENT OF PUBLIC INFRASTRUCTURE
Is there water in street
Any other requirements
Signature
ENGINEERING DEPARTMENT
1. Is street accepted?
2. If "No" is street part of approved sub-division
3. Is there any Board of Survey Street existing withinYes
Is Public Sewerage available to this lot?
. If "NO", can sewerage be extended or constructed Yes No
Is a storn drain available to this lot? Yes
sto I non
Signature
SPECIAL STIPULATIONS

In cases of no sewerage, plans shall be submitted of the sanitation system approved by the Department of Inspectional Services.

In cases of additional requirements by the Engineering Department or the Department of Infrastructure, an approved plan shall be submitted to the Department of Inspectional Services.

NO BUILDING PERMIT SHAIT RE ICCITET

CITY OF NEW BEDFORD LICENSE NO. DATE 8 30 20 07

FOUNDATION PERMIT

MSBC Sect. 111.8 – Any permit issued shall be deemed abandoned and invalid unless the work authorized by it shall have been commenced within six (6) months after its issuance.

This certifies that	milt Howes	, owner/contractor
has permission to	Loudation	
on(Grushnet avc.	PLOT 127/1056
providing that the person accepting plication therefor on file in this office By-Laws of the City of New Bedfor Moving, Repairing or Tearing Down	this permit shall in every respect; to the provisions of the Statud relating to the Inspection, E	pect conform to the terms of the apute of the Commonwealth and to the
WIRING INSPECTOR	PLUMBING INSPECTOR	BUILDING INSPECTOR
		ROUGH FINISH
YOUR AREA INSPECTOR IS:		- Tel. 979-1540 Between 8:00 AM - 9:00 AN

NOTICE: NOTIFY INSPECTOR 48 HOURS
IN ADVANCE OF APPLYING
SHEATING OR LATHING

OCCUPANCY PERMIT REQUIRED BEFORE OCCUPANCY

No Building or Structure shall be used or occupied until the Certificate of Use and Occupancy shall have been issued by the Building Commissioner – MSBC. Sect. 120.1 – N.B. Zoning Ord. Sect. 9-269

THIS CARD MUST BE DISPLAYED IN A CONSPICUOUS PLACE ON THE PREMISES AND NOT TORN DOWN OR REMOVED UNTIL COMPLETION OF WORK

SUBJECT TO MASSACHUSETTS STATE BUILDING CODE REQUIREMENTS

BUILDING INSPECTOR

Received

CITY OF NEW BEDFORD INSPECTIONAL SERVICES APPLICATION FOR BUILDING PERMIT DEPARTMENT/COMMISSION REVIEW

2				1.7	epartment of .
The attached Appli	cation for the Buildin	o Permit has be	en submitted to		Sariment and is requested
for the following lo					onwhere the house to cloor. Ask
127	G	# 2825T	ACUSHNE		Tale.
PLOT	LOT	NO.	S	TREET (W.S.)	225'± 5, JOH105T.
BY: Long Built	Homes, The = Robert	- <mark>Гоно</mark> Оп оепа	n of the owner	GLADYS L	SAMOU
	construction proposed	by this applica	tion the Inspect	ional Superintend	ent has determined that
	tions accompanying th	is application	are available for	r review in the Ins	pectional Services
	you have reviewed this				
					return this form to the
Inspectional Service	es Department no later	r than		•	•
4 Lext	O7 This perio	ew form must l	he signed by a n	erson authorized t	o conduct review on
behalf of your Depa	ertment or Commission		oc signed by a p	CISON MANNOTIZECT	p conduct to the wolf
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<u>R</u>	EVIEW REQUESTE	ED BY THE F	OLLOWING	CTTY DEPARTA	<u>aents</u>
☐ AIRPORT COM	IMISSION OFFICE	☐ INSPI	ECTIONAL SERV	/ICES	☐ DPI (WATER)
ASSESSOR'S D	EPARTMENT		HEALTH		
	TAL STEWARDSHIP		WIRE		
(CONSERV	•	_	PLUMBING		
☐ HISTORICAL C			r fike bert		
ENGINEERING TREASURES O		L PLAN	NING DEPARTM	reu i	
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DEMENDEN ON		NC DI ANG			
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RECOMMEND	ED BUILDING PER	MIT BE	APPROVED	□· R ì	EJECTED
_ 1	CONDITIONALLY				
CONDITIONS:	Duilde-lowner	~ must or	oply. For a r	un address ru	imber for new
ouilding once	front door is	framed. N	umboris) re	ortoining to	the previous.
structure was	motbe re-use	ounless in	Engillering 's trescour 10	venties, via Vation actand	the previous that of the previous was
IR BECOMMEN	DATION OF PERM	TT REJECT	ON IS MADE	CITE SPECIFIC	C REASONS &
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Enginering for	- Length (min olos	of Dense	- prmit. It	no storm di	the submitted to thin on streets 8/24/1 T- Engineering 8/24/1
water to be re	thained on-site	Cinfiltration	in trimati).	STACKED DP.	I- Eng Moning: 8/14/