



PERMIT NO.

24054

CITY OF NEW BEDFORD
SEWER AND/OR STORM DRAIN PERMIT

DATE 5-27-08

This certifies that permission is granted to

Gordon Hawes 139 Rowe St. New Bedford MA 02740
Property Owner Address Tel. 508-994-0621

To connect a sewer and/or storm drain located at 139 Rowe St.

Assessor's Plot 87 Lot 58, to the sewer and/or storm drain in Rowe St. connect from street to house

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 220 G.P.D.

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:

Chris Mendoza 45 Chase Rd. No. Dartmouth, MA 02747
Name Address Tel.

Type of Pipe Required: SDR 35 PVC

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 \$450, plus an Entrance Fee of \$411.67 where applicable, must accompany this application.

Bank# New Bedford Credit Union Check# 505 Date 5/27/08 Receipt# 7854

Other requirements: 24 hour notice for inspection - call

508-979-1527 - Contact Health Dept to abandon septic system.

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 Andrade City Engineer

Gordon Hawes Signature of Property Owner or Representative

INSPECTED BY: Bob Bichel
DATE: 7/8/08 (7/10/08?)
COMMENTS:

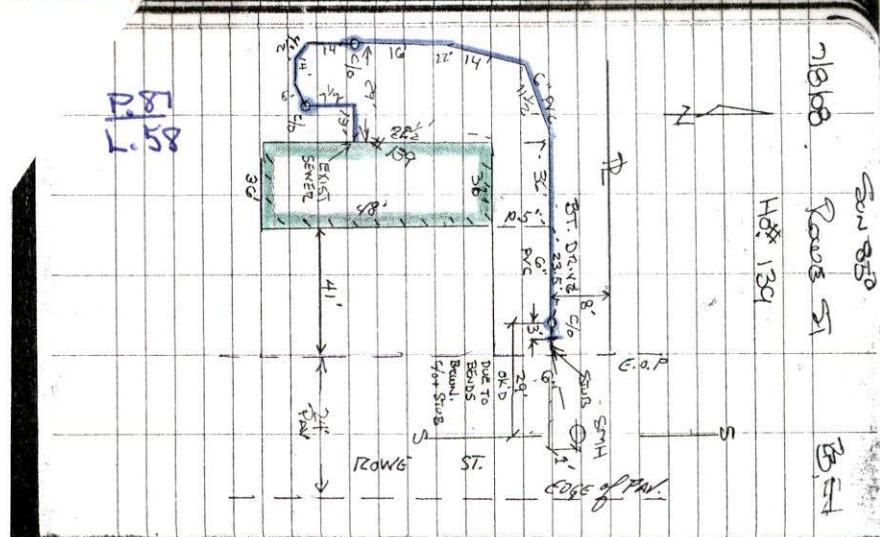
APPROVED

DISAPPROVED

See attached copy of permit for inspector's signature.

SIGNATURE

INSPECTOR'S REPORT





Inspector

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Dwight Andrade.....cs
City Engineer

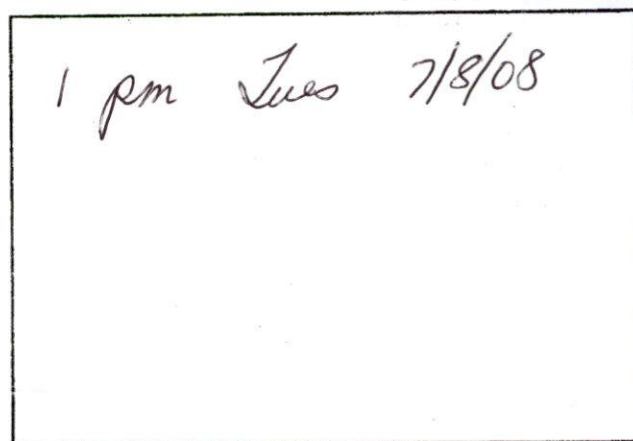
Gordon Hawes
Signature of Property Owner or Representative

INSPECTOR'S REPORT

INSPECTED BY: [Signature]
DATE: 7/10/08
COMMENTS:

APPROVED ☒ DISAPPROVED

[Signature]
SIGNATURE



SKETCH PLAN

Rec'd 7/10/08

Page 51

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Hö 139



Donnerstag 24054

CONTRADICTION: CHRS MENDEZZA

SENIOR COZN. FROM
STUD TO HOUSE



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City Engineer

Gordon Hawes
Signature of Property Owner or Representative

INSPECTOR'S REPORT

INSPECTED BY:.....

DATE:.....

COMMENTS:.....

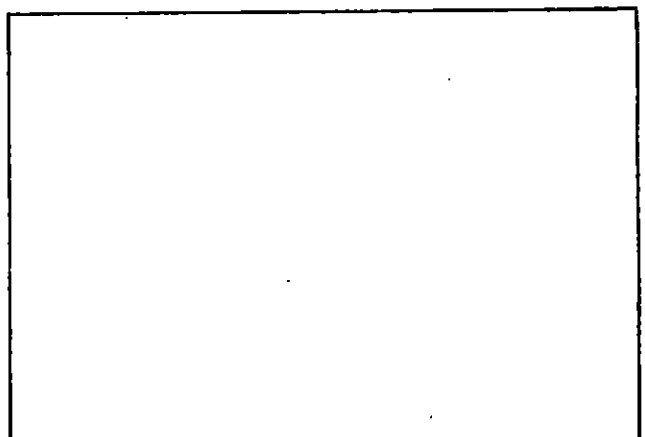
.....

.....

APPROVED

DISAPPROVED

SIGNATURE



SKETCH PLAN

Carol Sherman

To: Sarah Porter
Subject: RE: SEWER TIE-IN

THANKS
CAROL

-----Original Message-----

From: Sarah Porter
Sent: Wednesday, May 28, 2008 8:45 AM
To: Carol Sherman
Subject: RE: SEWER TIE-IN

Yes - thank you Carol

-----Original Message-----

From: Carol Sherman
Sent: Tuesday, May 27, 2008 9:44 AM
To: Sarah Porter
Subject: SEWER TIE-IN

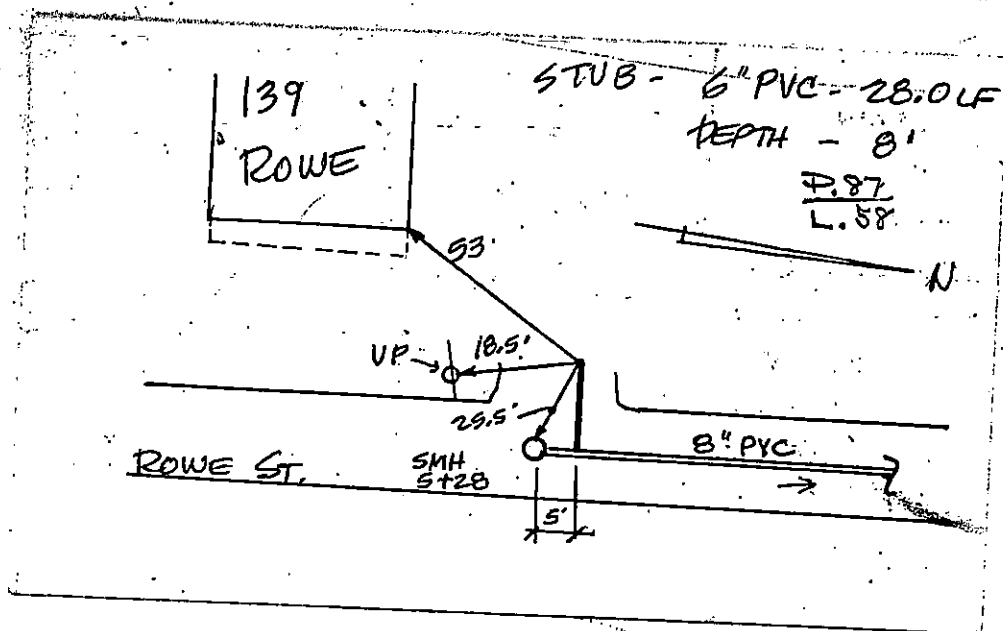
SARA

PROPERTY OWNER OF 139 ROWE ST WOULD LIKE TO CONNECT SEWER FROM STUB TO HOUSE
PLOT 87 LOT 58

MAY WE ISSUE A PERMIT?

THANK YOU FOR YOUR ASSISTANCE.

CAROL



DRAIN

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ROWE ST. (#139) WEST SIDE

Permit

No.

Enters ROWE ST.

Drain Plot No.

From Property of

TRANSMISSION VERIFICATION REPORT

TIME : 05/28/2008 08:45
NAME : DPI
FAX : 5089916152
TEL : 5089791551
SER.# : BROK7J714104

DATE, TIME
FAX NO./NAME
DURATION
PAGE(S)
RESULT
MODE

05/28 08:44
3143
00:00:51
01
OK
STANDARD
ECM

To Health Dept.



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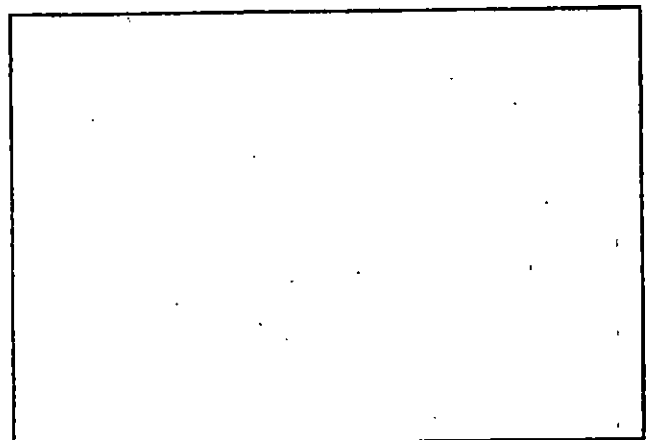
Dwight Orade.....cs
City Engineer

Gordon Hawes
Signature of Property Owner or Representative

INSPECTOR'S REPORT

INSPECTED BY: _____
DATE: _____
COMMENTS: _____

APPROVED _____ DISAPPROVED _____



SKETCH PLAN