PERMIT NO.



CITY OF NEW BEDFORD SEWER AND/OR STORM DRAIN PERMIT

DATE 9/2/1

| 24256 SEWER AND/OR ST | ORM DRAIN PERMIT |
|--|--|
| This certifies that permission is granted to | |
| William Potes 5 TRING Wa | (508) 998 1975 |
| Property Owner Address Occupied M | |
| To connect a sewer and/or storm drain located at | olfield St |
| Assessor's Plot .1.3.2.1. Lot .1.8.3, to the sewer and/or storm de | rain in She ffield St Street |
| \sim | mort bridge of the land |
| To be laid in accordance with the conditions in this application and to TYPE OF USE: RESIDENTIAL COMMERCIAL | INDUSTRIAL FLOW G.P.D. |
| If and bound of how a strail manager of author of Author | rization from Property Owner |
| If applicant other than actual property owner, attach Letter of Autho | Tel |
| Mailing Address | |
| hol Comessa P.O. Box | 1693 308 3999 |
| Name Address Type of Pipe Required: PY | Tel. |
| | |
| 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. inspe If this connection is to be part of a private service shared jo | ctor before backfilling. sintly with other building owners, attach copy of Recorded |
| Joint Maintenance Agreement. | |
| Public Infrastructure of required plans and supplemental in | licants only upon receipt and approval by the Commissioner of formation. |
| In addition, a City-issued Industrial User Discharge Permit Commonwealth of Massachusetts D.E.P. shall be required | and/or a Sewer Extension/Connection Permit issued by the |
| Industrial User Discharge Permit No | Date |
| Comm. Mass. Sewer Conn./Ext. Permit No | Date |
| A Filing and Inspection Fee of \$, plus an Entrance Fee of | f \$. v where applicable, must accompany this application. |
| Bank# C9462008 Park Check# 1685 | Date 9/2/11 Receipt# 09007 |
| Other requirements: 2.4 hours partice for | |
| Other requirements: 3. 4 | |
| 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 other special rules as the Commissioner of Public Infrastru | pertinent ordinances of the City of New Bedford, and such |
| | Dan Miller |
| City Engineer (S) | Signature of Property Owner or Representative |
| | |
| INSPECTO | R'S REPORT |
| INSPECTED BY: | 1018 SHETTICLD ST. |
| DATE: SILVING | 45" 7:5' 6 4" CI |
| | 33.7' |
| | #1018 |
| APPROVED DISAPPROVED | 5 SINGLE & |
| 111111 | Fom. 35' |
| SIGNATURE | 1 10013 |
| SIGNATURE | 5. 5. |
| | 45' |
| | 10:75' |
| | G.07P |
| The second secon | SHEFFIELD |
| | |
| | |

1018 Sheffield J William Peters. 022065 Water service P 132 H 183 30,75a LF X 24 LF 738.00 450.00 Seus Peimit 1188.00.



PERMIT NO. 24256

CITY OF NEW BEDFORD SEWER AND/OR STORM DRAIN PERMIT

DATE 9/2/1

| This certifies that permission is granted to |
|---|
| Property Owner Address Occurret MP, 02743 Tel. (SOS) 998 1975 |
| To connect a sewer and/or storm drain located at 1018 Shellfield St |
| Assessor's Plot 132 H. Lot 183, to the sewer and/or storm drain in Sheffield St |
| Assessor's Plot .1.3.2.11. Lot .1.8.2, to the sewer and/or storm drain in . Sheffield St |
| If applicant other than actual property owner, attach Letter of Authorization from Property Owner. NameTel |
| Mailing Address. The Bonded Contractor/Drain Layer authorized to perform this work is: 508 948 3404 Name Address Tel. |
| Name Type of Pipe Required: PYC Address 35' Tel. |
| 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 |
| Comm. Mass. Sewer Conn./Ext. Permit No |
| 1 1 |
| Bank# C14°2005 Book Check# 1685 Date 9/2/11 Receipt# 09007 |
| Other requirements: 24 hour potice for inspection @ 508-991-6150 |
| 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 Infrastructure and/or City Engineer may deem necessary |
| Duade ardiade Jane Miller |
| City Engineer Signature of Property Owner or Representative |
| INSPECTOR'S REPORT |
| P |
| INSPECTED BY: |
| COMMENTS: |
| |
| APPROVED |
| APPROVED DISAPPROVED |
| A for the had |
| SIGNATURE |
| U DAGINAL VALL |

SKETCH PLAN

PERMIT NO.



CITY OF NEW BEDFORD SEWER AND/OR STORM DRAIN PERMIT

DATE 9/2/4

24256
This certifies that permission is granted to

| Which Potes 5 THE Way (Sub) 992 1975 |
|---|
| Property Owner Address Communication of the Inc. |
| To connect a sewer and/or storm drain located at. |
| Assessor's Plot 133 H. Lot 183, to the sewer and/or storm drain in 5/2 1/10/5/ 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 FLOW |
| If applicant other than actual property owner, attach Letter of Authorization from Property Owner. Name |
| Mailing Address |
| The Bonded Contractor/Drain Layer authorized to perform this work is: |
| Name Address Tel. Type of Pipe Required: Address |
| |
| 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 |
| Comm. Mass. Sewer Conn./Ext. Permit No |
| Bank# 0149 Check# 1685 Date 9/0/11 Receipt# 09017 |
| Other requirements: 24 hoce of 100 for in Specifical 6 508 99/16/150 |
| 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 |
| City Engineer Signature of Property Owner or Representative |
| INSPECTOR'S REPORT |
| INSPECTED BY: |
| DATE: COMMENTS: |
| |
| APPROVED DISAPPROVED |
| AFFROVED |
| Istal Medical |
| SIGNATURE |
| |

SKETCH PLAN

Board of Health, Now Relief, MA. DISPOSAL SYSTEM CONSTRUCTION PERMIT

| Permission is hereby granted to | ; Construct() Repa | air(;) Upgrade(|) Abandon(| an individual sewa | ge disposal system |
|--|-------------------------|----------------------------|----------------|-------------------------|--------------------|
| at 1018 Sheffield | ST | | | as described in the | ne application for |
| Disposal System Construction | Permit No. <u>11-06</u> | , dated <u> </u> | <u>v</u> . | | # |
| Provided: Construction shall b | oe completed within th | : iree years of the dat | e of this pern | nit. All Jocal conditio | ns must be met. |
| Form 1255 Rev. 5/96 A.M. Suikin Co. Boston, MA | Date <u>5/2/11</u> | Board of Health | h Loupe | Tullas | |

HP Officejet Pro 8500 A910 All-in-One series

Fax Log for PUBLIC INFRASTRUCTURE 5089916152 Sep 02 2011 12:24PM

Last Transaction

| Date | Time | Туре | Station ID | Duration | Pages | Result |
|-------|---------|----------|------------|-------------|-------|--------|
| | - | | | Digital Fax | | |
| Sep 2 | 12:23PM | Fax Sent | 3143 | 0:55 N/A | 1 | OK |

Faxed to mary freire
9/2/11

Carol Sherman

From:

Sarah Porter

Sent:

Wednesday, August 31, 2011 8:11 AM

To: Subject: Carol Sherman RE: SEWER TIE-IN

Carol, all set, no wetlands in vicinity Thanks Sarah

From: Carol Sherman

Sent: Tuesday, August 30, 2011 2:32 PM

To: Sarah Porter

Subject: SEWER TIE-IN

SARA

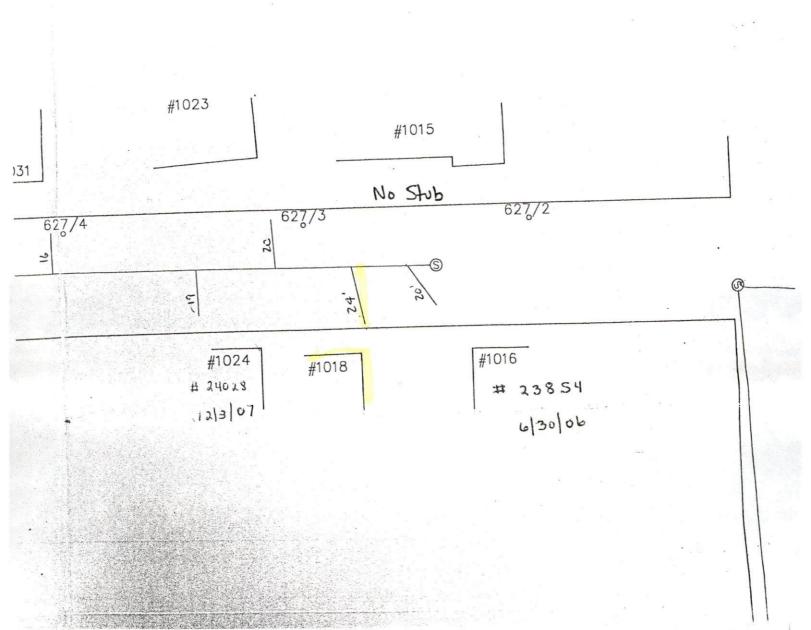
OWNERS OF 1018 SHEFFIELD ST ARE COMING HERE FOR INFO TO TIE IN TO CITY SEWER SYSTEM

STUB IS AT THEIR PROPERTY LINE

PLOT 132 H LOT 183

PLEASE LET ME KNOW IF WE CAN ISSUE A SEWER PERMIT FOR TIE-IN

CAROL



| | at a second seco | • | | , | *** | | , | 3. 3. 4. 4. 4. | اگردهم د د د | egy to | | , | ************************************** | и чан п м м м | 3 7 10 37 74 | F | Tage 1 | , , , , , , , , , , , , , , , , , , , | 44. | | 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 | | | |
|--------|--|--------|------|----------|-------------------|-----------|------|----------------|-----------------------|----------|-----------|--------------|--|------------------------------|------------------|-------|--------------------|---------------------------------------|-----------|-----------------|---------------------------------------|-------|-------|----------|
| | | | 1 | <u>*</u> | | 1 | | 1 | 1 | | | | | SUL | | | k. | | | | | | | |
| | ,¥ | | | | | | | | | | , | | | | | | | | | (250) | 4,7 | | | L & J |
| - | | | | | | | | | | | | \$ 51 | | | | | | | - | } |) sú-a | | | LAJERALS |
| | | | | | | | | | | - | | SHEFFIELD | | HAF | | . , . | | | | 1 1 V | <u> </u> | FRON | 8.01# | |
| | . | | | | | | | | | | | 57 | | | , | | , b' | <i>i</i> * | 1, 6, | 2 2 5 | | PORCH | _ | |
| ,** | | †- | | | | | | | | | | | | | 8" Séwéz (| | ۰, | | CURB LINE | FORCE MAIN (4"+ | _ | | | |
| | | , | | | | · | | | | ar a | | | | | SEVER (6'X DEEP) | | ATEZ MAIN (5TOEED) | | 1 | 41 55575 | | | | |
| , ú | March . | | | | . := <u>-</u> | | | | | <u> </u> | | <u> </u> | <u> </u> | | <u> </u> | | | - | | - | والاناليون. | | | |

WALL BT 450 DRIVE 3,6 45 4:0.7 VI w 1018 SHETTIGLD 0 9.75 1.7 0 % 10:75 50 US 33.7 SHEFFIELD TOTOLE & #1018 FOM. N U 28' 13.5 DEC 137 H 181 197 Des. 1. 8 24256 1250:2:0011 DATE: 9/14/11 OHIMACION, R.J. Conessa 一つのころ (8)