PERMIT NO. CITY OF NEW BEDFORD SEWER AND/OR STORM DRAIN PERMIT 24434 This certifies that permission is granted to Long Built HOYLL 153 Charles McCumbs Blvd 508 269 **Property Owner** To connect a sewer and/or storm drain located at. 145 mate To be laid in accordance with the conditions in this application and the City of New Bedford ordinances COMMERCIAL TYPE OF USE RESIDENTIAL **INDUSTRIAL** 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: Mercury Heavy Equipment Address Type of Pipe Required:... 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 \$....... where applicable, must accompany this application. Bank# Dou ( Check# \33 Other requirements:... Sewer NO Part of jointly-shared private line YES Connection made to 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 tative City Engineer P130 6N Inspections NSPECTOR'S INSPECTED BY: DATE: **COMMENTS:** DISAPPROVED APPROVED **SIGNATURE** 

\* Subdivisions PERMIT NO.

CITY OF NEW BEDFORD

CANDIOD STORM DRAIN PERMIT

exp 6/1/16

DATE COLLES

24434 SEWER AND/OR	STORM DRAIN PERMIT
This certifies that permission is granted to	TAM
Long Built HULLS 153 Charles Y	Tel.
To connect a sewer and/or storm drain located at 145	mate Drive
Assessor's Plot 130 Ctot 201, to the sewer and/or stor	m drain in Mate Drive (8") Street
To be laid in accordance with the conditions in this application a TYPE OF USE. RESIDENTIAL COMMERCIAL	
Mailing Address	Form this work is:
Name Type of Pipe Required: (CS) Address Type of Pipe Required: (CS)	Tel.
PERMIT EXPIRES ONE YEAR AFTER DATE OF ISSUE	rain where applicable. Storm water cannot be discharged to a
Joint Maintenance Agreement.  Permits can be issued to Industrial and/or Commercial Public Infrastructure of required plans and supplement In addition, a City-issued Industrial User Discharge Pe Commonwealth of Massachusetts D.E.P. shall be requi Industrial User Discharge Permit No	Applicants only upon receipt and approval by the Commissioner of al information.  Trimit and/or a Sewer Extension/Connection Permit issued by the ired by the City for Industrial Discharge into the sewer system.  Date  Date  Date  Date  Date  Date  Date  Date
Connection made to  Sewer  Part of jointly-sha  Storm Drain	red private line YES (NO)
other special rules as the Commissioner of Public Infra  Manuel H. Silved  Supervising Civil Engineer	Signature of Property Owner or Representative
	CTOR'S REPORT
INSPECTED BY: Autorio P Sana DATE: 6/2/2017 COMMENTS:	See Att.
APPROVED DISAPPROVED	
Yould have	
SIGNATURE	I I

SKETCH PLAN

PERMIT NO.

24434

\*Subdivision

# CITY OF NEW BEDFORD SEWER AND/OR STORM DRAIN PERMIT

DATE COLLIS

This certifies that permission is granted to
Long Built Hours 153 Charles McCambs Blvd 508-269-7782 Property Owner Address Tel.
To connect a sewer and/or storm drain located at 145 mate Drive
Assessor's Plot 130 Got 2091, to the sewer and/or storm drain in Matter Drive (8") 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 33 G.P.D.
If applicant other than actual property owner, attach Letter of Authorization from Property Owner.
Name
Name Address Tel. Type of Pipe Required: CSDR 35
PERMIT EXPIRES ONE YEAR AFTER DATE OF ISSUE
<ul> <li>Requires separate connections for sewage and storm drain where applicable. Storm water cannot be discharged to a</li> </ul>
sanitary sewer.  All work must be inspected and approved by a D.P.I. inspector before backfilling.  All work must be inspected and approved by a D.P.I. inspector before backfilling.
<ul> <li>If this connection is to be part of a private service shared jointly with other building owners, attach copy of Recorded Joint Maintenance Agreement.</li> </ul>
<ul> <li>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.</li> </ul>
<ul> <li>In addition, a City-issued Industrial User Discharge Permit and/or a Sewer Extension/Connection Permit issued by the</li> </ul>
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#Bay Coast Check# 13370 Date 6/1/15 Receipt#
Other requirements: Dlase Call 24 hrs in advance
Jor enspection
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
hasand 4 con the
City Engineer Signature of Property Owner or Representative
Supervising Civil Engineer Signature of Property Owner or Representative
INSPECTOR'S REPORT
INSPECTED BY:
DATE: COMMENTS:
COMMENTS.
APPROVED DISAPPROVED
SIGNATURE

SKETCH PLAN



#### **Department of Public Infrastructure**

Ronald H. Labelle Commissioner

> Water Wastewater Highways Engineering Cemetery

### CITY OF NEW BEDFORD Jonathan F. Mitchell, Mayor

To Whom It May Concern:						
Long Built Homes, Inc., having a mailing address of						
X158 C. McCombs Blvd., New Bedford, MA 02745, being (Name) (Mailing Address)						
Owner of property located at						
145 MATY DRIVE						
Lee Castignetti and/or						
Plot 130G, Lot 209, hereby agree to allow Tony Shardella Name)						
New Bedford, MA 02745 signature in securing permit for:  , to act on my behalf including affixing my						
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 By: Jole Signature Robert F. Long President						
158C. McCombs Blvd. New Bedford, MA 02745  Address 508-245-3161 or  508-995-8240×13  Date Telephone number						

Commonwealth of Massachusetts



City Hall, Room 308, 133 William Street New Bedford, MA 02740 (508) 979-1540

No. B-15-705

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

FEE PAID \$100.00

This certifies that Robert F. Long						
owner/contractor has permission to:	WS	MATE DR	145 N	MATE D	RIVE	_
on: Foundations Only 1-2 Family - 100.00						
Providing that the person accepting this permit shall in evor of the statute of the Comonwealth adn to the by-laws of the reparing, or tearing down of a building.						
Permit is issued subject to the	e following spe	ecial requirements: (Re	estrictions)			
Wiring Inspector	*	Plumbing Inspec	etor		HE ST LEE	Building Inspector
YOUR AREA INSPECTOR IS: T	homas Welch			Tel. (508) 9	979-1540 B	etween 8:00am - 9:00am
NOTICE: NOTIFY INSPECTOR 48 HOURS IN						ORE OCCUPANCY

ADVANCE OF APPLYING SHEATHING OR LATHING

by the Building Commissioner - MSBC, Sect. 120.1

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 . Danny D. Rome

**Building Inspector** 

**Plan Review Comments:** 

City of New Bedford ·DPI 1105 SHAWMUT AVENUE NEW BEDFORD, MA 02740 508-979-1550

002520-0004 Erin I. 06/01/2015 12:13PM

450.00

450.00D

450.00C

450.00

450.00

450.00

450.00

0.00

0.00

#### **MISCELLANEOUS**

Description: DPI SEWER PERMITS AND EXTENSIONS

(DPISEW) Reference 1: 145 MATE

DPI SEWER PERMITS AND

**EXTENSIONS** 

1 @ 450.00 DPI SEWER PERMITS AND

EXTENSIONS

Principal

Interest

TW05-101009-

63906000-422185-Payment Id: 35208

Subtotal

Total TW05-CHECK

Check Number 13370

Change due

Paid by: LONG BUILT HOMES

Thank you for your payment

CUSTOMER COPY DUPLICATE RECETPT

#### DISPLAY PERMIT IN A CONSPICUOUS PLACE ON THE PREMISES



#### **Commonwealth of Massachusetts**

## City of New Bedford

133 William Street New Bedford, MA 02740



### **SEWER PERMIT**

Date: 7/16/2015		No. WW	-15-16
	Diag Circu	0.00	
Sewer Connection Fee: \$450.00	Pipe Size:	0.00	
	Trench Length:	0.00	
Service Location: WS MATE DR	Owner Name:	CASTIGNETTI LEE J	R
Type of Occupancy: Residential	Type of Work:	Sewer - New Sewer S	Service
Work Description: 8" SEWER CONNECTION IN MATE DR PVC SDR 35	RIVE		
EXP 6/2/2015			
P130G L209			
No. of Units : Required Design Daily Flow :	0.00	Provided Daily Flow :	0.00
The undersigned petitions you to grant permission to ENhereby agrees to the following:	TER INTO THE MAIN S	SEWER and, if such per	mission is granted,
To abide by the conditions and regulations important ordinance now in force, or as amended from time 2. That the connection of said sewer with the main Public Works or by a designated agent of the Toman 3. That the work shall at all times be under the direct authorized agent, and that any expense incurred parmittee.	e to time.  In sewer shall be inspection  Sown before burial of sail  Bection and control of the	ted by an employee of t d connection. e Commissioner of Pub	he department of
permittee agrees to reimburse the Town for said expense.			
Installing Company Name:		License Type:	
Address:City/Town/State:			

#### **GRANTED WITH THE USUAL CONDITIONS**

