



CITY OF NEW BEDFORD SEWER AND/OR STORM DRAIN PERMIT

DATE /a/

24465 SEWER AND/OR STORM DRAIN PERMIT
This certifies that permission is granted to
Ocations Moundains BET Teather Hill to BOS SET + 1204
Property Owner Address lei.
To connect a sewer and/or storm drain located at Clause 100 100 100 100 100 100 100 100 100 10
Acceptable Plat II Lat 117 1173 to the server and/or storm drain in Colorecting wints Court 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 FLOWG.P.D.
If applicant other than actual property owner, attach Letter of Authorization from Property Owner.
NameTel
The Bonded Contractor/Drain Layer authorized to perform this work is:
Name Address Tel. Type of Pipe Required: Address
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
Bank#C142015 Benk Check# 2384 Date / /16 Receipt# 160598
Other requirements: Mease Call alread 245 active for the postile.
(508) 979 1150 02 67305-
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
other special rules as the Commissioner of Public Intrastructure and/or City Engineer may deem necessary
City Engineer OC Signature of Property Owner or Representative
Supervising Curl Enginer
INSPECTOR'S REPORT
INSPECTED BY:
DATE: COMMENTS:
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APPROVED Out Type Catch Lateral Catch C
Basin St.
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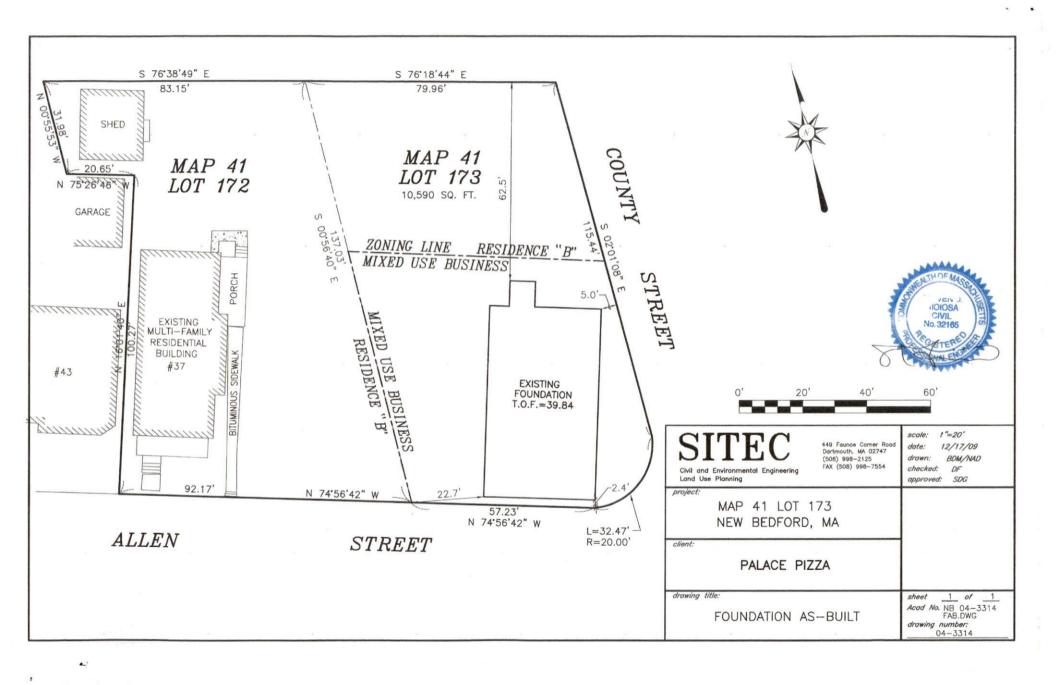
PERMIT NO. 24465 This certifies that p

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DATE / 2/16

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Property Owner Address	S		3.7.287 1.407	
o connect a sewer and/or storm drain loca	ted at Circumty St (vi	05.) 70'+/- L	Dx allen St	
o be laid in accordance with the condition	the cower and/or storm drain	in I III well of the	III IIII	Street bein
o be laid in accordance with the condition YPE OF USE: RESIDENTIAL	in this application and the COMMERCIAL	City of New Bedford o INDUSTRIAL	FLOW	G.P.D.
Name		Tel	ner. \mp	339 1339
The Bonded Contractor/Drain Lav	er authorized to perform this	work is: - Pending	(
Name Type of Pipe Required. S.D.A	Address		Tel.	
ERMIT EXPIRES ONE YEAR AFTE	R DATE OF ISSUE			
If this connection is to be part of a Joint Maintenance Agreement. Permits can be issued to Industria Public Infrastructure of required point in addition, a City-issued Industria Commonwealth of Massachusetts Industrial User Discharge Permit No Comm. Mass. Sewer Conn./Ext. Permit A Filing and Inspection Fee of \$.45.00 Bank#Citizens Bank Connection Fee of \$.45.00 Other requirements: Place Sewer Connection made to Storm Drain Applicant agrees to abide by the abouther special rules as the Commission	and/or Commercial Applical lans and supplemental informal User Discharge Permit and D.E.P. shall be required by the thick of the shall be required by the shall be required	nts only upon receipt a nation. /or a Sewer Extension he City for Industrial Date	Connection Permit issued Discharge into the sewer sele, must accompany this a Receipt#	d by the ystem.
X Manuel H. Sila Supervising Cari	3	11	Property Owner or Repr	resentative
supervising Cur	INSPECTOR'S	REPORT		
INSPECTED BY:				1
DATE: COMMENTS:				
COMMENTS:				
APPROVED DIS	APPROVED			
SIGNATURE	and the second of the second o			

SKETCH PLAN



DISPLAY PERMIT IN A CONSPICUOUS PLACE ON THE PREMISES



Commonwealth of Massachusetts

City of New Bedford

133 William Street New Bedford, MA 02740

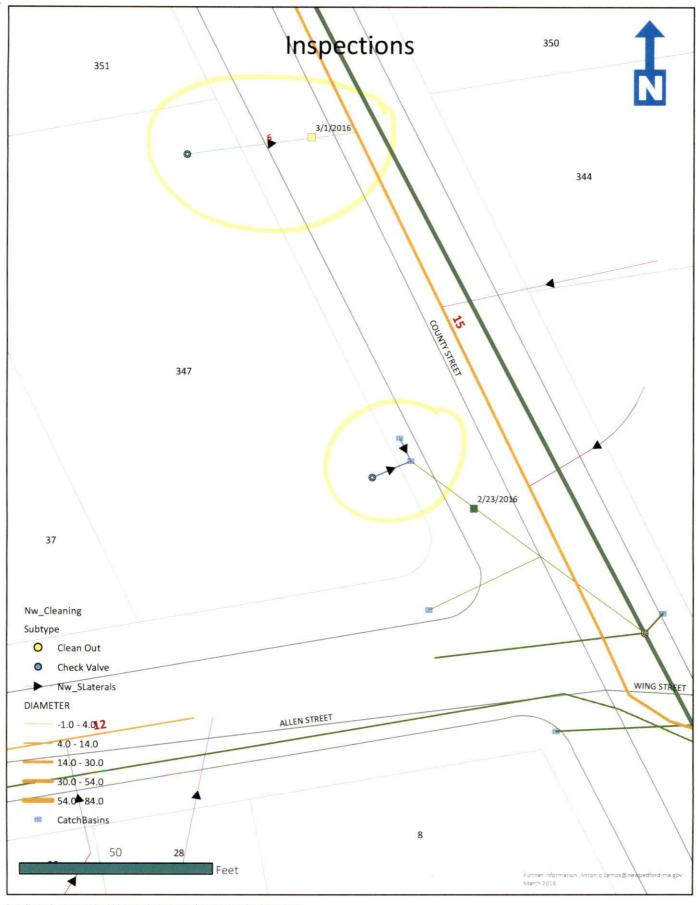


SEWER PERMIT

Date: 4/19	9/2016			No.	WW-16-2
Sewer Con	nection Fee:	\$450.00	Pipe Size: Trench Length:	0.0	0.00
Service Location: _3	37 /	ALLEN ST	Owner Name:	MOURATIDIS G	EORGEMOURATIDIS
Type of Occupancy:	Residen	tial	Type of Work:	Sewer - New Se	ewer Service
Work Description:	sewer per	mit # 24465			
	P.41 L.172 + 17	73			
		t WS 70 +/- N x Allen St lace Pizza 27/17			
No. of Units :	0	Required Design Daily Flow :	0.00	Provided Daily Flow :	0.00
hereby agrees to	the follow				
ordinan 2. That th Public \ 3. That th authoriz permittee	ce now in the connection Works or busine work shaped agent,	conditions and regulations import force, or as amended from time ion of said sewer with the main by a designated agent of the To all at all times be under the dire and that any expense incurred se the Town for said expense.	e to time. I sewer shall be inspect own before burial of said ection and control of the	ted by an employed connection. e Commissioner c	ee of the department of
Installing Company Nan	ne:			License Type:	
Address:		City/Town/State:			

Work O	rder Nu	mber: 16-00	1435								2/22/2016 3:39 PM
Category:	Service l					Pı	riority:	-			
Problem:	Locate R					C	Crew:				
Cause:					S	Supervisor: MANUEL SILVA			U/U ar Sa Britan ar a Sa S		
Main Task:	Investigate / Inspect					St	tatus:	New Wor	k Order		
Work Order Start	er Start Date/Time:					w	Work Order End Date/Time:				
Location 332 COUNTY	20.0										
SEWER INSPEC			COUNTY AND A	LLEN							
Task Start Date/T	ime:					Task	End Date/Tir	me:		$\sqrt{}$	
Task Code:		SWT220 Task Des		Descript	ion:	Investigate / Inspect					
							Time Type			_	
Employee Numb	PI	mployee Name ERCY REYNOLI			Reg 0.00	<u>OT</u> 0.00	Normal 0.00	<u>Type</u> REGULAR		<u>Units</u> Hours	
14950		NTONIO LEMOS			0.00	0.00	0.00	REGULAR		Hours 4.5	
2/23/201	16	Antonio +	Emor		4.5			v	/		
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2/21/20	16	António	Lemol		1.5			/		1.5	
3/01/20	16	Antonio	LEMA		1.5			/	<u> </u>	1.5	
Equipment Code		Equipmen	nt Description						<u>Units</u>		
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Material Code		Material D	Description						<u>Units</u>		
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Fluid Code		Fluid Des	cription						Units		
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Info. 0x Panto Long 3/02/2016



Coordinate System: NAD 1983 StatePlane Massachusetts Mainland FIPS 2001 Projection: Lambert Conformal Conic

Datum: North American 1983