## CITY OF NEW BEDFORD

24562 SEWER AND/OR STORM DRAIN PERMIT

This certifies that permission is granted to							
Property Owner Address MA Tel.							
To connect a sewer and/or storm drain located at. 10 110011100 5t							
Assessor's Plot							
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 A A Address Tel. Type of Pipe Required:							
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 sanitary sewer.</li> </ul>							
<ul> <li>All work must be inspected and approved by a D.P.I. inspector before backfilling.</li> <li>If this connection is to be part of a private service shared jointly with other building owners, attach copy of Recorded</li> </ul>							
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.							
<ul> <li>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.</li> </ul>							
Industrial User Discharge Permit No							
Comm. Mass. Sewer Conn./Ext. Permit No							
A Filing and Inspection Fee of \$							
Bank# PC1 Cocs   Check# 10212 / 10213 Date 2/15/18 Receipt# 537755 / 1537750							
Other requirements:							
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							
X Studen Cuntar X Kalury Classes							
City Engineer Supervisor Signature of Property Owner or Representative							
INSPECTOR'S REPORT							
INSPECTED BY: SEE WHITE SHEET							
DATE:							
COMMENTS:							
APPROVED DISAPPROVED  SIGNATURE  Signature State of the second of the se							
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## CITY OF NEW BEDFORD SEWER AND/OR STORM DRAIN PERMIT

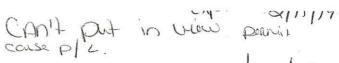
DATE 2/15/18

	This certifies that permission is granted to								
\	Property Owner Address MA Tel.								
1	To connect a sewer and/or storm drain located at 10 Dollma St								
	Assessor's Plot 75 Lot 209., to the sewer and/or storm drain in Nashua Sir Sewer 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.  Name								
	Name (C) CANCOH Address Tel. Type of Pipe Required:								
	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 sanitary sewer.</li> <li>All work must be inspected and approved by a D.P.I. inspector before backfilling.</li> <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> <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> <li>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.</li> <li>Date</li>     &lt;</ul>								
	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								
	SIGNATURE								

SKETCH PLAN



PERMIT NO. 24562



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

DATE 2/15/18

This certifies that permission is granted to	8
Property Owner Address MA	508-542-3442 Tel.
To connect a sewer and/or storm drain located at. 10	ma St
Assessor's Plot	rain in NaShua Si Sewer Street
To be laid in accordance with the conditions in this application and to TYPE OF USE; RESIDENTIAL COMMERCIAL	the City of New Bedford ordinances.  INDUSTRIAL FLOWG.P.D.
If applicant other than actual property owner, attach Letter of Author	rization from Property Owner.
The Bonded Contractor/Drain Layer authorized to perform	
Name (C) CANCS Address Type of Pipe Required:	Tel.
PERMIT EXPIRES ONE YEAR AFTER DATE OF ISSUE	
<ul> <li>Requires separate connections for sewage and storm drain v sanitary sewer.</li> </ul>	where applicable. Storm water cannot be discharged to a
<ul> <li>All work must be inspected and approved by a D.P.I. inspected.</li> </ul>	
If this connection is to be part of a private service shared jo  Loint Maintenance Agreement	intly with other building owners, attach copy of Recorded
Joint Maintenance Agreement.  Permits can be issued to Industrial and/or Commercial App	licants only upon receipt and approval by the Commissioner of
Public Infrastructure of required plans and supplemental in	formation.
In addition, a City-issued Industrial User Discharge Permit	
Commonwealth of Massachusetts D.E.P. shall be required Industrial User Discharge Permit No	
Comm. Mass. Sewer Conn./Ext. Permit No	f \$3.2.2.2.2.2.2.2.2.2.2.2.2.2.2.2.2.2.2.2
Bank# Bay Coast Check# 10212/10	213 Date 215 18 Receipt# 537255 1537750
FOR INSPECTION O Other requirements: NOTICE IS REQUIR	NLY A 24 HOUR
CONTRACTOR/APP	LICANT IS
REQUIRED TO NOT  @ 508 979-1550 Press	
Connection made to Sewer PERMIT EXPIRES 1	YEAR
Storm Drain	9
Applicant agrees to abide by the above terms, as well as all other special rules as the Commissioner of Public Infrastruc	pertinent ordinances of the City of New Bedford, and such cture and/or City Engineer may deem necessary
X Sturtan Cunton	X Kalul Classon
City-Engineer	Signature of Property Owner or Representative
Engineering Supervisor	
INSPECTOR	2'S REPORT
INSPECTED BY: ANTONIO LEMOS	
DATE: 2/28/2018	
COMMENTS:	
Houndonment of Sept.c	
2 System	
APPROVED DISAPPROVED	
Antonio Paulo Londo	
SIGNATURE	

SKETCH PLAN

Work O	rder	Number: 18-002939						•	2/27/2018 10:27 AM
Category:	Servi	ce Lateral Gravity		Prior		iority:			10.21 AM
Problem:	Locat	cate Request				Crew:			
Cause:					Sı	pervisor:	STEPHANIE DUPRAS		
Main Task:	Inves	stigate / Inspect	•		St	atus:	New Work Order		
Work Order Start	Date/	Time:			w	ork Order E	ind Date/Time:		
Location 10 NASHUAS			<u> </u>	_					
		n Request lot 269 inspection sched for 2/2	8/18 @ 9:	00am for	RJ Cane	essa			
Task Start Date/T	ime:				Task E	nd Date/Ti	me:		
Task Code:		SWT220	Tas	Task Description:		Investig	ate / Inspect		
						Time	e Type		
Employee Number 14950		Employee Name ANTONIO LEMOS		Reg 0.00	<u>OT</u> 0.00	Normal 0.00	Type REGULAR TIME	<u>Units</u> Hours	
	<u>.                                    </u>					- <del></del>			_
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Equipment Code		Equipment Description	<u> </u>	-		-	<u>Units</u>	_	-
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Material Code		Material Description	<u>-</u>				<u>Units</u>		
Fluid Code									
		<u> </u>							
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Work	Order	Number: 18-002732						2/22/2018 8:29 AM	
Category:	Serv	ice Lateral Gravity			Priority: Crew:			0.23 AW	
Problem:	Cont	ractor Inspection		(		9			
Cause:				!	Supervisor:	STEPHANIE DUPRAS	STEPHANIE DUPRAS		
Main Task:	Inves	stigate / Inspect			Status:	New Work Order			
Work Order Sta	rt Date/	Time:		1	Work Order E	End Date/Time:			
Location 10 NASHUAS									
		n Request PM Friday 2/23/18							
Task Start Date/	Time:			Task	End Date/Ti	me:			
Task Code:		SWT220	Task Description:		Investigate / Inspect				
			·		Time	е Туре	_		
Employee Num 14950	ber	Employee Name ANTONIO LEMOS	Reg 0.00	<u>OT</u> 0.00	<u>Normal</u> 0.00	Type REGULAR TIME	<u>Units</u> Hours		
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Equipment Cod	<u>le</u>	Equipment Description				<u>Units</u>			
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Material Code		Material Description				<u>Units</u>			
iviaterial Code		Material Description				Offits			
Fluid Code		Fluid Description	5			<u>Units</u>			
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