



PERMIT NO.

CITY OF NEW BEDFORD  
SEWER AND/OR STORM DRAIN PERMIT

DATE 3-5-18

This certifies that permission is granted to

Property Owner

Address

Tel.

To connect a sewer and/or storm drain located at

Assessor's Plot ..... Lot ..... to the sewer and/or storm drain in ..... 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 \_\_\_\_\_ 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:

Name ..... Address ..... Tel. ....

Type of Pipe Required: 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 \$....., plus an Entrance Fee of \$..... where applicable, must accompany this application.

Bank# Chase Bank Check# 453 Date 3-5-18 Receipt# 1560625

Other requirements: Call 24 hr in advance for inspection

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

Adam Manager  
City Engineer

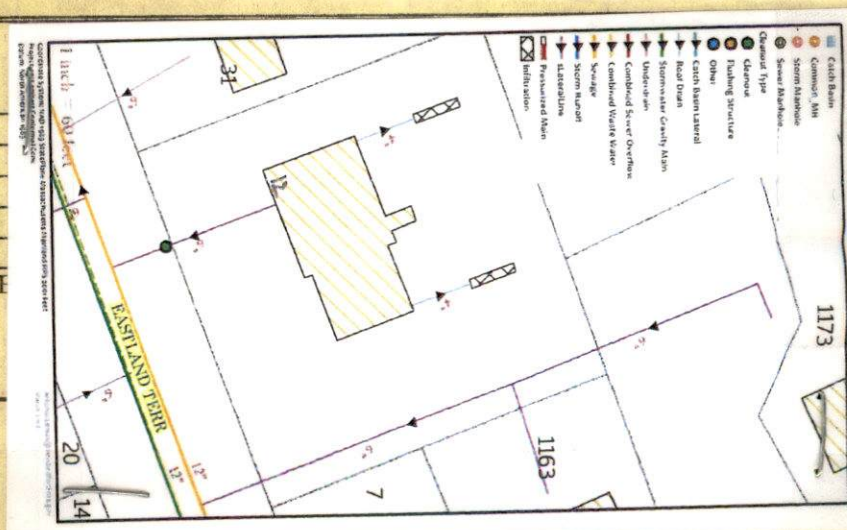
Paul Vignone  
Signature of Property Owner or Representative

INSPECTED BY: SEE WHITE SHEET  
DATE: \_\_\_\_\_  
COMMENTS: \_\_\_\_\_

APPROVED

DISAPPROVED

SIGNATURE



SKETCH PLAN



EXP 3-5-19

WWT-18-25



PERMIT NO.  
24568

CITY OF NEW BEDFORD  
SEWER AND/OR STORM DRAIN PERMIT

DATE 3-5-18

This certifies that permission is granted to

Property Owner George Verissimo Address 1 Cookie way S. Dart. Tel. 774 231 292

To connect a sewer and/or storm drain located at Eastland Ter (NS) 201' W x Rockdale Ave

Assessor's Plot 74 Lot 179, to the sewer and/or storm drain in \_\_\_\_\_ 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 \_\_\_\_\_ G.P.D.

If applicant other than actual property owner, attach Letter of Authorization from Property Owner.

Name RJ Canessa Tel. \_\_\_\_\_

Mailing Address \_\_\_\_\_

The Bonded Contractor/Drain Layer authorized to perform this work is:

Name \_\_\_\_\_ Address \_\_\_\_\_ Tel. \_\_\_\_\_

Type of Pipe Required: 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.
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- 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 \$ 50, plus an Entrance Fee of \$ \_\_\_\_\_ where applicable, must accompany this application.

Bank# Citizen Bank Check# 453 Date 3-5-18 Receipt# 1560625

Other requirements: Call 24 hr in Advance for Inspection

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

Adam M. Amato  
City Engineer  
Adam Manager

George Verissimo  
Signature of Property Owner or Representative

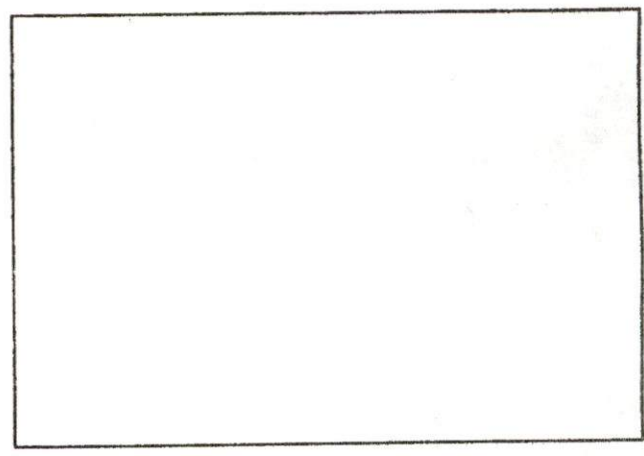
INSPECTOR'S REPORT

INSPECTED BY: \_\_\_\_\_  
DATE: \_\_\_\_\_  
COMMENTS: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

APPROVED DISAPPROVED

SIGNATURE



SKETCH PLAN





PERMIT NO.

CITY OF NEW BEDFORD  
SEWER AND/OR STORM DRAIN PERMIT

DATE

This certifies that permission is granted to

Property Owner

Address

Tel.

To connect a sewer and/or storm drain located at

Assessor's Plot .....Lot....., to the sewer and/or storm drain in.....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 \_\_\_\_\_ 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:

Name.....Address.....Tel.....

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.
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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 \$..... where applicable, must accompany this application.

Bank#.....Check#.....Date.....Receipt#.....

Other requirements:.....

Connection made to ☒ Sewer ☐ Storm Drain Part of jointly-shared private line YES ☐ NO

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: SEE WHITE SHEET  
DATE:  
COMMENTS:

APPROVED DISAPPROVED

SIGNATURE

SKETCH PLAN





Inspection

EXP 3-5-19

PERMIT NO.

24568

CITY OF NEW BEDFORD  
SEWER AND/OR STORM DRAIN PERMIT

DATE 3-5-18

This certifies that permission is granted to

Property Owner Jorge Verissimo Address 1 Cookie way S. part. Tel. 774 231 292

To connect a sewer and/or storm drain located at Eastland Ter (N.S.) 201' W x Rockdale Av

Assessor's Plot 74 Lot 179, to the sewer and/or storm drain in.....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 \_\_\_\_\_ G.P.D.

If applicant other than actual property owner, attach Letter of Authorization from Property Owner.

Name R.J. Canessa Tel. \_\_\_\_\_

Mailing Address \_\_\_\_\_

The Bonded Contractor/Drain Layer authorized to perform this work is:

Name \_\_\_\_\_ Address \_\_\_\_\_ Tel. \_\_\_\_\_

Type of Pipe Required: 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.
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- Industrial User Discharge Permit No. \_\_\_\_\_ Date \_\_\_\_\_

Comm. Mass. Sewer Conn./Ext. Permit No. \_\_\_\_\_ Date \_\_\_\_\_  
A Filing and Inspection Fee of \$ 150, plus an Entrance Fee of \$ \_\_\_\_\_ where applicable, must accompany this application.

Bank# Citizen Bank Check# 453 Date 3-5-18 Receipt# 1560625

Other requirements: Call 24 hr in Advance for Inspection

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

Adam Amado  
City Engineer

Jorge Verissimo  
Signature of Property Owner or Representative

INSPECTOR'S REPORT

INSPECTED BY: Antonio Lemos

DATE: 2/15/2018

COMMENTS:

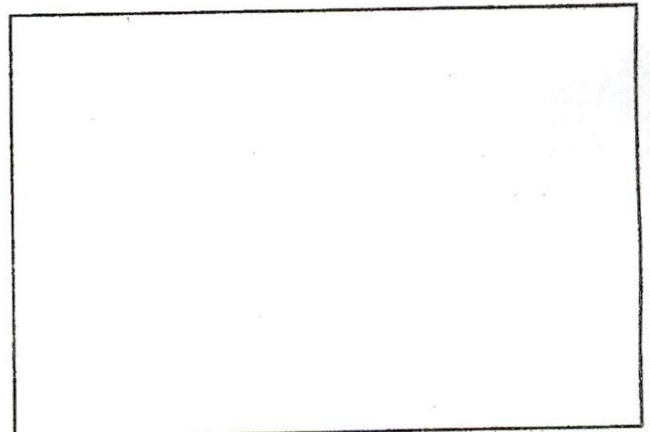
NEW HOME / NEW SERVICE

APPROVED

DISAPPROVED

Antonio Paulo Lemos

SIGNATURE



SKETCH PLAN





9AM Monday  
Roof Drain 3-26-18.

EXP 3-5-19

PERMIT NO.

24568

CITY OF NEW BEDFORD  
SEWER AND/OR STORM DRAIN PERMIT

DATE 3-5-18

This certifies that permission is granted to

Property Owner Jorge Verissimo Address 1 Cookie way S. part. Tel. 774 231 292

To connect a sewer and/or storm drain located at Eastland Ter (N.S) 201' W x Rockdale Ave

Assessor's Plot 74 Lot 179, to the sewer and/or storm drain in.....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 \_\_\_\_\_ G.P.D.

If applicant other than actual property owner, attach Letter of Authorization from Property Owner.

Name R.J. Canessa Tel. \_\_\_\_\_

Mailing Address \_\_\_\_\_

The Bonded Contractor/Drain Layer authorized to perform this work is:

Name \_\_\_\_\_ Address \_\_\_\_\_ Tel. \_\_\_\_\_

Type of Pipe Required 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.
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- 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 \$ 150, plus an Entrance Fee of \$ \_\_\_\_\_ where applicable, must accompany this application.

Bank Citizen Bank Check# 453 Date 3-5-18 Receipt# 1560025

Other requirements: Call 24 hr in Advance for Inspection

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

Admin Manager  
City Engineer

Jorge Verissimo  
Signature of Property Owner or Representative

INSPECTOR'S REPORT

INSPECTED BY: Antonio Lemos  
DATE: 3/26/2018  
COMMENTS:

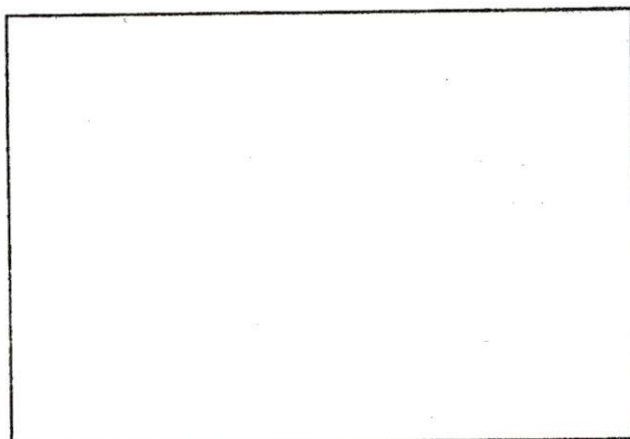
Drain Roof

APPROVED

DISAPPROVED

Antonio Lemos

SIGNATURE



SKETCH PLAN



Commonwealth of Massachusetts

# CITY OF NEW BEDFORD

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



## FOUNDATION PERMIT

2/8/2018

No. **B-17-2019**

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

FEE PAID \$100.00

This certifies that **JASON BRAZ**

owner/contractor has permission to:

NS

EASTLAND TER

on: **Foundations Only 1-2 Family - 100.00**

Providing that the person accepting this permit shall in every respect conform to the terms of application therefore on file in this office; to the provisions of the statute of the Commonwealth and to the by-laws of the City of New Bedford relating to the inspection, erection, enlarging, altering, raising, moving, repairing, or tearing down of a building.

Permit is issued subject to the following special requirements: (Restrictions)



Wiring Inspector

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_



Plumbing Inspector

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_



Building Inspector

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

YOUR AREA INSPECTOR IS: **Matthew Silva**

Tel. (508) 979-1540 Between 8:00am - 9:00am

**NOTICE: NOTIFY INSPECTOR 48 HOURS IN  
ADVANCE OF APPLYING SHEATHING OR LATHING**

**OCCUPANCY PERMIT REQUIRED BEFORE OCCUPANCY**

No Building or Structure shall be used or occupied until the Certificate of Use and Occupancy shall have been issued 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

*Matthew Silva*

Plan Review Comments:



3/21/10  
2:10 PM  
George V. Silva  
in re: Jason & Bob

# Building Division

City Hall, Room 308, 133 William Street  
New Bedford, MA 02740

APPLICATION TO CONSTRUCTION, REPAIR, RENOVATE, CHANGE THE USE OR OCCUPANCY OF, OR DEMOLISH  
A DWELLING

Permit No #: TB-17-2019

Date Received:

8/16/2017

Signature: JASON BRAZ

Building Commissioner/Inspector of Buildings:

Date:

## SECTION 1: SITE INFORMATION

1.1 Property Address

NS EASTLAND TER (N.S.) 201' W. X ROCKDALE AVE. 74-179 ✓

1.2 Assessors Map & Parcel Number

1.3 Zoning Information

RA

Zoning District

Proposed Use

1.4 Property Dimensions

6887 sqft 6887 L179  
8114 + 6887 L180

Lot Area

Frontage (ft)

1.5 Building Setbacks (ft)

Front Yard

Side Yard

Rear Yard

Required

Provided

Required

Provided

Required

Provided

25.00

30.00

5.80

20.00

65.50

51.00

1.6 Water Supply

False

1.7 Flood Zone Information

1.8 Sewage Disposal

False

## SECTION 2: PROPERTY AUTHORIZED AGENT

Agent of Record

JASON BRAZ

42 BUSH ST.

DARTMOUTH

MA. 02748

Name

Address

## SECTION 3: Description of Proposed Work

Permit For: Foundations Only 1-2 Family - 100.00

Brief Description of Proposed Work:

FOUNDATION

PLOT 74 LOT 179

OK ownership  
(see attached)

MR

## SECTION 4: Estimated Construction Costs / Payment

Total Project Cost :

\$10,000.00

Payment Date

Total Permit Fee Paid:

\$0.00

Account Number

THIS IS NOT A PERMIT

2/22/18  
JASON BRAZ WAS  
HERE FOR PRE-CON.  
MTE. FOR ANOTHER  
SITE, AND THEN THIS  
SITE ON EASTLAND TER  
WAS BROUGHT. IN SHORT,  
MANNY SILVA TOLD  
JASON & BOB CANESSA  
AT COUNTER THAT IF  
SWAYD WATER/SEWER,  
WILL HAVE TO REVISE  
SITE PLAN ATTACHED



**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: **5/25/2018**

No. **WW-18-25**

Sewer Connection Fee: **\$450.00**

Pipe Size: **0.00**

Trench Length: **0.00**

Service Location: **NS EASTLAND TER**

Owner Name: **TERCEIRA CONSTRUCTION LLC**

Type of Occupancy: **Residential**

Type of Work: **Sewer - New Sewer Service**

Work Description: **sewer #24568**

**P.74**

**L.179**

**Eastland Terrace Ns 201' W x Rockdale Ave**

**expires 03/05/19**

No. of Units : **0**

Required Design Daily Flow : **0.00**

Provided Daily Flow : **0.00**

The undersigned petitions you to grant permission to ENTER INTO THE MAIN SEWER and, if such permission is granted, hereby agrees to the following:

1. To abide by the conditions and regulations imposed by the Commissioner of Public Works by statute or by ordinance now in force, or as amended from time to time.
2. That the connection of said sewer with the main sewer shall be inspected by an employee of the department of Public Works or by a designated agent of the Town before burial of said connection.
3. That the work shall at all times be under the direction and control of the Commissioner of Public Works or his authorized agent, and that any expense incurred by the Town shall be charged to the permittee, and said

permittee

agrees to reimburse the Town for said expense.

Installing Company Name: **Robert J. Canessa**

License Type: **DPI - Other**

Address: **P. O. Box 51643**

City/Town/State: **New Bedford**

**MA**

**Call (781) 942-9077 For Inspection**



Work Order Number: 18-003932

3/14/2018  
2:02 PM

Category: Service Lateral Gravity Priority: \_\_\_\_\_  
Problem: Contractor Inspection Crew: \_\_\_\_\_  
Cause: \_\_\_\_\_ Supervisor: STEPHANIE DUPRAS  
Main Task: Investigate / Inspect Status: New Work Order  
Work Order Start Date/Time: \_\_\_\_\_ Work Order End Date/Time: \_\_\_\_\_

Location (s)

EASTLAND TER

Comments from Request

Eastland Terrace NS 201' W x Rockdale P74 L179 Thursday 1pm 3/15/18

Task Start Date/Time: \_\_\_\_\_ Task End Date/Time: \_\_\_\_\_

Task Code: SWT220 Task Description: Investigate / Inspect

Employee Number	Employee Name	Time Type				Units
		Reg	OT	Normal	Type	
14950	ANTONIO LEMOS	0.00	0.00	0.00	REGULAR TIME	Hours

_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____

Equipment Code	Equipment Description	Units
----------------	-----------------------	-------

_____	_____	_____
_____	_____	_____
_____	_____	_____

Material Code	Material Description	Units
---------------	----------------------	-------

_____	_____	_____
_____	_____	_____
_____	_____	_____

Fluid Code	Fluid Description	Units
------------	-------------------	-------

_____	_____	_____
_____	_____	_____
_____	_____	_____



Work Order Number: 18-004414

3/23/2018  
2:34 PM

Category: Service Lateral Gravity Priority: \_\_\_\_\_  
Problem: Contractor Inspection Crew: \_\_\_\_\_  
Cause: \_\_\_\_\_ Supervisor: STEPHANIE DUPRAS  
Main Task: Investigate / Inspect Status: New Work Order  
Work Order Start Date/Time: \_\_\_\_\_ Work Order End Date/Time: \_\_\_\_\_

Location (s)

EASTLAND TER

Comments from Request

Eastland Terrace NS 201' W x Rockdale Ave- P.74 L179 roof drain inspection Monday 3-26-18 9am RJ CANESSA

Task Start Date/Time: \_\_\_\_\_ Task End Date/Time: \_\_\_\_\_

Task Code: SWT220 Task Description: Investigate / Inspect

Employee Number	Employee Name	Time Type				Units
		Reg	OT	Normal	Type	
14950	ANTONIO LEMOS	0.00	0.00	0.00	REGULAR TIME	Hours

_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____

Equipment Code	Equipment Description	Units
----------------	-----------------------	-------

_____	_____	_____
_____	_____	_____
_____	_____	_____

Material Code	Material Description	Units
---------------	----------------------	-------

_____	_____	_____
_____	_____	_____
_____	_____	_____

Fluid Code	Fluid Description	Units
------------	-------------------	-------

_____	_____	_____
_____	_____	_____
_____	_____	_____



