

CITY OF NEW BEDFORD SEWER AND/OR STORM DRAIN PERMIT

DATE 3-5-18

This certifies that permission is granted to				
Colar Visiosamo A. Cock		Simula	77423	19019
Property Owner Address		101.		
To connect a sewer and/or storm drain located at	Lloyd To C	(02).501	WX X	CKCN OF H
Assessor's PlotLot, to the sewer as	nd/or storm drain in	1.,		Street
To be laid in accordance with the conditions in this app	plication and the C	ty of New Bedford ord	inances.	
TYPE OF USE: RESIDENTIAL COMM	MERCIAL	INDUSTRIAL	FLOW	G.P.D.
If applicant other than actual property owner, attach Le	etter of Authorizati	on from Property Owne	r.	
Name Mailing Address		Tel		
The Bonded Contractor/Drain Layer authorize	ed to perform this v	work is:		
Name Address			Tel.	
Name Address Type of Pipe Required:				
PERMIT EXPIRES ONE YEAR AFTER DATE O	F ISSUE			1000
Requires separate connections for sewage and	storm drain where	applicable. Storm was	ter cannot be disc	harged to a
 sanitary sewer. All work must be inspected and approved by 	a D.P.I. inspector h	before backfilling.		
 If this connection is to be part of a private ser 	vice shared jointly	with other building ow	ners, attach copy	of Recorded
Joint Maintenance Agreement. Permits can be issued to Industrial and/or Cor	mmercial Applican	ts only upon receipt and	i approval by the	Commissioner of
Public Infrastructure of required plans and su	pplemental informa	ation.		
 In addition, a City-issued Industrial User Disc Commonwealth of Massachusetts D.E.P. shall 	charge Permit and/	or a Sewer Extension/C	onnection Permit	issued by the
Industrial User Discharge Permit No		Date		
Comm. Mass. Sewer Conn./Ext. Permit No	ntrance Fee of \$	where applicable,	must accompany	this application.
Bank# 1700 Check# 4				
Other requirements:	TO HEIZO	MU TOS	7 (1) KALT	7.07.1
Connection made to Sewer Part of jo	ointly-shared privat	e line YES NO	5	
Storm Drain				
Applicant agrees to abide by the above terms,	as well as all perti	nent ordinances of the	e City of New Be	dford, and such
other special rules as the Commissioner of Pub	lic Infrastructure	and/or City Engineer	may deem neces	ssary
Warn Anado		******************	herin	***************
City Engineer		Signature of Pro	operty Owner or	Representative
Down Manager		English taken salah salah salah	N 0 1 1 1 1 1 1	111000000000000000000000000000000000000
,	THE THE PERSON NAMED IN COLUMN TO SERVICE AND SERVICE	A.	Comb Sexual Storm St	Catch f Commission Scientific Sewer Camout Type Cleano Chan Catch Reaf C
INSPECTED BY: SEE WATE SHEET DATE:	Section of the sectio		drain fixed West fixed West fallon action	kadin Dr. MH Manhole W W W W Manhole W W Manhole M Manhole Manhole M Manhole M Manhole M Manhole Manhole M Manhole M Manhole M Manhole M Manhole M M Manhole M M M M M M M M M M M M M M M M M M M
COMMENTS:	September 1	.,	n water	e e rai
	La Company	FILL		1 - 9
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APPROVED DISAPPROVE	200	7		
	No.		29	7 73
	3 13	\		
SIGNATURE	STATE OF THE PARTY	\		(1
	0 15	1	1163	/W

PERMIT NO. 24568

CITY OF NEW BEDFORD SEWER AND/OR STORM DRAIN PERMIT

This certifies that permission is granted to	
Property Owner Address To connect a sewer and/or storm drain located at Cast land To	S. Part. 774231292
Property Owner Address	Tel.
To connect a sewer and/or storm drain located at COST COND	U (NS) 201 WX KOULLEY
Assessor's Plot	ain inStreet
To be laid in accordance with the conditions in this application and the TYPE OF USE; RESIDENTIAL COMMERCIAL	he City of New Bedford ordinances. INDUSTRIAL FLOWG.P.D.
If applicant other than actual property owner, attach Letter of Author	ization from Property Owner.
Mailing Address	Tel
The Bonded Contractor/Drain Layer authorized to perform	this work is:
Name	Tel.
PERMIT EXPIRES ONE YEAR AFTER DATE OF ISSUE	
Requires separate connections for sewage and storm drain v	where applicable. Storm water cannot be discharged to a
 sanitary sewer. All work must be inspected and approved by a D.P.I. inspected. 	ctor before backfilling.
 If this connection is to be part of a private service shared jo. 	intly with other building owners, attach copy of Recorded
Joint Maintenance Agreement. • Permits can be issued to Industrial and/or Commercial Apple	licants only upon receipt and approval by the Commissioner of
Public Infrastructure of required plans and supplemental inf	formation.
Commonwealth of Massachusetts D.E.P. shall be required by	by the City for Industrial Discharge into the sewer system.
Industrial User Discharge Permit No	Date
Comm. Mass. Sewer Conn./Ext. Permit No	f \$ where applicable, must accompany this application.
Bank#Citizen Bank Check# 453	Date 3-5-18 Receipt# 150002
Bank#Citizen Bank Check# 453 Other requirements: Call 24 hr in Ad	vance for Inspection
(Sewer)	
Connection made to Part of jointly-shared p	rivate 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 Infrastruc	cture and/or City Engineer may deem necessary
Allen Made	joil Vienn
City Engineer	Signature of Property Owner or Representative
INSPECTOR	R'S REPORT
INSPECTED BY:	
COMMENTS:	
APPROVED DISAPPROVED	
SIGNATURE	
SIGNATURE	





CITY OF NEW BEDFORD SEWER AND/OR STORM DRAIN PERMIT

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Property Owner				cvcvie i
o connect a sewer and/or stor	rm drain located at			
ssessor's PlotLot.	, to the sewer and/or	storm drain in		Street
o be laid in accordance with TYPE OF USE; RESIDEN	the conditions in this application	on and the City of New Bedfo	rd ordinances. FLOW	G.P.D.
f applicant other than actual p	property owner, attach Letter o	f Authorization from Property	Owner.	
Name		Tel		
The Bonded Contract	tor/Drain Layer authorized to p	perform this work is:		
	Address		e	
Type of Pipe Require	ed:			
ERMIT EXPIRES ONE Y	EAR AFTER DATE OF ISS	UE		
	nnections for sewage and storm		m water cannot be disc	harged to a
sanitary sewer.				
 All work must be insp If this connection is t 	pected and approved by a D.P. to be part of a private service s	hared jointly with other buildi	ng owners, attach copy	of Recorded
Joint Maintenance As	greement			
Permits can be issued Public Infrastructure	d to Industrial and/or Commerce of required plans and supplement	cial Applicants only upon rece ental information.	ipt and approval by the	Commissioner of
. In addition a City-iss	sued Industrial User Discharge	Permit and/or a Sewer Exten	sion/Connection Permit	issued by the
Commonwealth of M	lassachusetts D.E.P. shall be re	equired by the City for Industr	ial Discharge into the se	ewer system.
Industrial User Discharge	Permit No	Date		
Comm. Mass. Sewer Con	n./Ext. Permit No	Date		
A Filing and Inspection F Bank#	nn./Ext. Permit No	ce Fee of \$ where appl	Receipt#	this application.
A Filing and Inspection F Bank#	ee of \$, plus an Entrand	ce Fee of \$ where appl	Receipt#	this application.
A Filing and Inspection F Bank#	Gee of \$, plus an Entranc	ce Fee of \$ where appl	Receipt#	this application.
A Filing and Inspection F Bank#	Check#	Date	Receipt#	this application.
A Filing and Inspection F Bank#	Check#	ce Fee of \$ where appl	Receipt#	this application.
A Filing and Inspection F Bank#	Check# Check# Sewer Part of jointly- Storm Drain de by the above terms, as we	Date	Receipt#	edford, and such
A Filing and Inspection F Bank#	Check# Sewer Part of jointly-	Date	Receipt# NO of the City of New Begineer may deem nece	edford, and such
A Filing and Inspection F Bank#	Check# Check# Sewer Part of jointly- Storm Drain de by the above terms, as we	Date	Receipt# NO of the City of New Begineer may deem nece	edford, and such
A Filing and Inspection F Bank#	Check# Check# Check# Sewer Part of jointly- Storm Drain de by the above terms, as we are Commissioner of Public In	Date	Receipt# NO of the City of New Begineer may deem nece	edford, and such
A Filing and Inspection F Bank# Other requirements: Connection made to Applicant agrees to abid other special rules as th City Engin	Check# Check# Check# Sewer Part of jointly- Storm Drain de by the above terms, as we be Commissioner of Public In Lieer.	Date	Receipt# NO of the City of New Begineer may deem nece	edford, and such
A Filing and Inspection F Bank#	Check# Check# Check# Sewer Part of jointly- Storm Drain de by the above terms, as we be Commissioner of Public In Lieer.	Date	Receipt# NO of the City of New Begineer may deem nece	edford, and such
A Filing and Inspection F Bank#	Check# Check# Check# Sewer Part of jointly- Storm Drain de by the above terms, as we be Commissioner of Public In Leer INSP	Date	Receipt# NO of the City of New Begineer may deem nece	edford, and such
A Filing and Inspection F Bank#	Check# Check# Check# Sewer Part of jointly- Storm Drain de by the above terms, as we be Commissioner of Public In Leer INSP	Date	Receipt# NO of the City of New Begineer may deem nece	edford, and such
A Filing and Inspection F Bank# Other requirements: Connection made to Applicant agrees to abic other special rules as th City Engin	Check# Check# Check# Sewer Part of jointly- Storm Drain de by the above terms, as we be Commissioner of Public In Leer INSP	Date	Receipt# NO of the City of New Begineer may deem nece	edford, and such
A Filing and Inspection F Bank# Other requirements: Connection made to Applicant agrees to abic other special rules as th City Engin INSPECTED BY: DATE:	Check# Check# Check# Sewer Part of jointly- Storm Drain de by the above terms, as we be Commissioner of Public In Leer INSP	Date	Receipt# NO of the City of New Begineer may deem nece	edford, and such
A Filing and Inspection F Bank# Other requirements: Connection made to Applicant agrees to abic other special rules as th City Engin INSPECTED BY: DATE:	Check# Check# Check# Sewer Part of jointly- Storm Drain de by the above terms, as we be Commissioner of Public In Leer INSP	Date	Receipt# NO of the City of New Begineer may deem nece	edford, and such
A Filing and Inspection F Bank# Other requirements: Connection made to Applicant agrees to abic other special rules as th City Engin INSPECTED BY: DATE: COMMENTS:	Check# Check# Sewer Part of jointly- Storm Drain de by the above terms, as we be Commissioner of Public In INSP	Date	Receipt# NO of the City of New Begineer may deem nece	edford, and such





PERMIT NO. SEWER AND/OR STORM DRAIN PERM 24568 This certifies that permission is granted to Address To connect a sewer and/or storm drain located at .., 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. FLOW **INDUSTRIAL** COMMERCIAL RESIDENTIAL TYPE OF USE: If applicant other than actual property owner, attach Letter of Authorization from Property Owner. Name K.) Canessa Tel Mailing Address..... The Bonded Contractor/Drain Layer authorized to perform this work is: Tel. 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 \$500..., plus an Entrance Fee of \$...... where applicable, must accompany this application. 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 Signature of Property Owner or Representative City Engineer INSPECTOR'S REPORT INSPECTED BY: ANTONIO LEMOS COMMENTS: HEN HO APPROVED DISAPPROVED





gan morday 3-20-18.

DATE 3-5-18

CITY OF NEW BEDFORD SEWER AND/OR STORM DRAIN PERMIT

245	568		SEWER AND/OR S	STORM DRAIN PERI	MIT	
	certifies that permission	n is granted to				
9	Property Owner	Address	Cookie wa	y s. part. Ter (OS) E	774 a	31292
То со	onnect a sewer and/or	storm drain locate	ed at East land	Ter (OS) 2	301, MX	Rockdale
Asses	ssor's PlotL	ot, to t	he sewer and/or storm	drain in		Str
	e laid in accordance, w E OF USE; RESID		s in this application an COMMERCIAL	d the City of New Bedf INDUSTRIAL		G.P.D.
If app	Name K.	inessa.		horization from PropertTel.		
	The Bonded Control	ractor/Drain Laye	er authorized to perfor	m this work is:		
	Name Type of Pipe Requ	uired: PYC	100		m 1	
PEDI	MIT EXPIRES ONE					
				n where applicable. Ste	orm water cannot be	discharged to a
•	sanitary sewer.		12	2		3
•	All work must be	inspected and app	proved by a D.P.I. ins	pector before backfillin	g.	cn
•	If this connection	is to be part of a	private service shared	jointly with other build	ling owners, attach o	opy of Recorded
	Joint Maintenance	Agreement.	and/or Commercial A	pplicants only upon rec	eint and approval by	the Commissione
	Public Infrastructi	ire of required nl	lans and supplemental	information.		
	In addition, a City	-issued Industria	I User Discharge Pern	nit and/or a Sewer Exter	nsion/Connection Pe	ermit issued by the
	Commonwealth of	f Massachusetts I	D.E.P. shall be require	ed by the City for Indus	trial Discharge into t	ne sewer system.
I	ndustrial User Discha	rge Permit No		Date	***************************************	
	4					
. (Comm. Mass. Sewer C	onn./Ext. Permit	No Entranca Fa	Date e of \$ where app	dicable must accom	nany this applicati
I	Bank# it ZON	Bank a	heck# 453	Date 3	5-18 Rece	eipt# 1560C
		1107	he in a	drance fo	LU2DO	
(Other requirements:	Call 21	MI WIN	Chould 10	71106X	$\mathcal{L}_{\mathcal{L}}$
	21					
•		(Sewer)				
(Connection made to		Part of jointly-share	d private line YES	(NO)	
		Storm Drain	1861 #3	1		
	A	hida bu tha aha	vo torme as wall as	all pertinent ordinance	es of the City of Ne	w Bedford, and su
. (Applicant agrees to a other special rules as	the Commission	ner of Public Infrast	ructure and/or City E	ngineer may deem	necessary
	all a Jac	\mathcal{A}	1.	110	igl Vino	ni
	JUL SY	LIMAG	<i>P.</i>		e of Property Own	**************
	City En			Signatur	e of Property Own	ei oi Kepi escutat
=	dann	Manag	INCRECT	OR'S REPORT		
	g g		INSPECT	OR'S KEPUKI		
1	INSPECTED BY: A	NTÓNIO LEMO	1			
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		Poof.	APPROVED	-		

Commonwealth of Massachusetts



CITY OF NEW BEDFORD



FOUNDATION PERMIT

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 commeced within six (6) months after its issuance.

FEE PAID \$100.00

This certifies that JASON BRAZ				
owner/contractor has permission t	o: NS EA	STLAND TER		
on: Foundations Only 1-2 Family - 100.0	0 12 (4) (4) (5)	April Marie Carlos Carl	,	_
Providing that the person accepting this perr of the statute of the Comonwealth adn to the reparing, or tearing down of a building.	nit shall in every respect confrom to by-laws of the City of New Bedford	the terms of application therefore or relating to the inspection, erection, e	n file in thi enlarging, a	s office; to the provisions altering, raising, moving,
	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			
Permit is issued	I subject to the following special requir	ements: (Restrictions)		
Wiring Inspector	Plumb	ing inspector		Building Inspector
· · · · · · · · · · · · · · · · · · ·				
YOUR AREA INSPI	ECTOR IS: Matthew Silva	Tel (508) 9	79-1540 E	Between 8:00am - 9:00am
	300C	UPANCY PERMITAREOUR	edire	

NOTICE: NOTIFY INSPECTOR 48 HOURS IN 1997 WA ADVANCE OF APPLYING SHEATHING OR LATHING

athis Card Must Be Displayed in a Conspicuous Place on the Premises and Not porn Down or Removed Until Completion of the

SUBJECT TO MASSACHUSETTS



	121° , 50%	Building E	Division 📙		
	2 Page John	€ity Hall, Room 308, New Bedford,	133 William Street		
	Gran a sass	arb 1	•		
APPLICATION TO	CONSTRUCTION, R	EPAIR RENOVATE, A DWEL	CHANGE THE USE O LING	R OCCUPANCY OF, C	DR DEMOLISH
Permit No #: TB-	17-2019	a long	Date Recieved:	8/16/20)17
Signature: JASO	N BRAZ	(Odina)	سيخ أن الماقط		-
Building Commission	ner/Inspector of Buildi		Date Date		
		SECTION 1 : SITE	INFORMATION		
1.1 Property Addres		,	1.2 Assessors Map	,	
NS EASTLAND T	ER (N.S.) 201	'w. X rock dal			
1.3 Zoning Informat	ion		1.4 Property Dimens		
RA			6883 TJKI	14 6884 F180	
Zoning District	Prop	oosed Use	Lot Aréa SIM	+6444	Frontage (ft)
1.5 Buildling Setbac	ks (ft)			13,8	
Front	Yard	Ślide	Yard	Rear Y	'ard
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 Inform	nation	1.8 Sewage Disposal	False
	SEC	TION 2: PROPERTY	AUTHORIZED AGEN	IT 	
Agent of Record					
JASON BRAZ		42 BUSH ST.	DAI	RTMOUTH MA.	02748
Name		Address			
	S	ECTION 3: Description	on of Proposed Work		
Permit For: For	undations Only 1-2	Family - 100.00			-
			· ·		
Brief Description of P	roposed Work:		-on our	e-Girb	
FOUNDATION			1000 all	assoct)	
PLOT 74 LOT 179			(300 000		SHENITHS SHENITHS THENITHS THENIT
				TRON BY	rez_was
				HERE FOR	
MR				MTE . MOR	MOTHER THE
	SECTIO	N 4: Estimated Cons	truction Costs / Pe	Kie, M	
Total Project Cost :	•	\$10,000.00	Payment Date	SITE ON E	A STANSON TE
Total Permit Fee Pai	d:	\$0.00		INGS CERCON!	A TOUGHT.
			Account Numb	S. KUMAN	CANESSA
,			72		CHT IN SHOWS LYA TOUG CANESSA CANT IF CHAIL IF
			\$# \$	BT COWN	E SEWEIGS
_	لات ال	S IS NO	r A PER	STEET STEET	AUTHORSE SE LO KENISE SE LYAL IE SOB
•				SITE	A Kanasasas
			<u>.</u>		

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:	0.0	00
Sewer Connection Fee: \$450.00	Trench Length:		0.00
Service Location: NS EASTLAND TER	Owner Name:	TERCEIRA CON	STRUCTION LLC
Type of Occupancy: Residential	Type of Work:	Sewer - New Se	ewer Service
Work Description: sewer #24568 P.74			
L.179			
Eastland Terrace Ns 201' W x Rockda	le Ave		
expires 03/05/19 No. of Units: 0 Required Design Daily Flow:	0.00	Provided Daily Flow:	0.00
		,	(1)
The undersigned petitions you to grant permission to EN hereby agrees to the following:	TER INTO THE MAIN S	SEWER and, if su	ch permission is granted
To abide by the conditions and regulations impordinance 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 Tomas 3. That the work shall at all times be under the direct authorized agent, and that any expense incurred permittee agrees to reimburse the Town for said expense.	ne to time. In sewer shall be inspection before burial of sail ection and control of the distribution by the Town shall be	ted by an employed connection. e Commissioner of	ee of the department of
Installing Company Name: Robert J. Canessa		License Type:	DPI - Other
Address: P. O. Box 51643 City/Town/State: _	New Bedford	MA	

Work (Order	Number: 18-003932							3/14/2018 2:02 PM
Category:	Servi	ice Lateral Gravity			F	riority:			
Problem:	Cont	ractor Inspection			(Crew:			
Cause:					\$	Supervisor:	STEPHANIE DUPRAS		
Main Task:	Inves	stigate / Inspect			\$	Status:	New Work Order		
Work Order Star	rt Date/	Time:			\	Vork Order E	ind Date/Time:		
Location EASTLAND									
		n Request ————————————————————————————————————	rsday 1pn	n 3/15/18					
Task Start Date/	Time:		_		Task	End Date/Ti	me:		
Task Code:		SWT220	Tas	k Descrij	ption:	Investig	ate / Inspect		
						Time	е Туре		
Employee Num 14950	<u>ber</u>	Employee Name ANTONIO LEMOS		Reg 0.00	<u>OT</u> 0.00	Normal	Type REGULAR TIME	<u>Units</u> Hours	
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Equipment Cod	<u>e</u>	Equipment Description					<u>Units</u>	_	-
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<u>Material Code</u>		Material Description					<u>Units</u>		
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		- 							
Fluid Code		Fluid Description					<u>Units</u>		
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		-					_		

Work O	rder	Number: 18-004414								3/23/2018 2:34 PM	
Category:	Servi	ce Lateral Gravity			Pri	ority:				1-2-12-01	
Problem:	Contr	ractor Inspection			Cr	ew:					
Cause:					Su	pervisor:	STEPHA	STEPHANIE DUPRAS			
Main Task:	Inves	tigate / Inspect			Sta	atus:	New Wor	rk Order			
Work Order Start	Date/	Time:			Wo	ork Order E	nd Date/Tim	ne:			
Location EASTLAND T											
		n Request 201' W x Rockdale Ave- P.74 L17	79 roof dr	ain inspe	ction Mon	day 3-26-1	8 9am RJ C/	ANESSA			
Task Start Date/T	ime:				Task E	nd Date/Ti	me:				
Task Code:		SWT220	Tas	sk Descri	ption:	Investig	ate / Inspect				
						Time	е Туре				
Employee Numb	<u>er</u>	Employee Name ANTONIO LEMOS		Reg 0.00	<u>OT</u> 0.00	Normal	Type REGULAR TIME		<u>Units</u> Hours		
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Equipment Code	2	Equipment Description						<u>Units</u>			
		-									
										(4)	
Material Code		Material Description						Units			
		_									
Fluid Code		Fluid Description						Units	-		
								2			
								-			



Coordinate System: NAD 1983 StatePlane Massachusetts Mainland FIPS 2001 Fee Projection: Lambert Conformal Conic Datum: North American 1983

Antonio.Lemos@newbedford-ma.gov March 2018