Expire 1 4 II-10



PERMIT NO.

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

DATE 4-27-18

| This certifies that permission is granted to  |  |  |                         |  |
|---|--|--|-------------------------|--|
| Property Owner Address De Com   | rout pro   | 102242   |                         | 15.2.5   |
| To connect a sewer and/or storm drain located at 2.5  | L.Hend. T  | MILLIGIELLS.   | 5)30'uxl                | or bolaks  |
| Assessor's PlotLotLot, to the sewer   | and/or storm drain   | in. 1250 Ld  | all. Onen               | Street   |
| To be laid in accordance with the conditions in this a TYPE OF USE; RESIDENTIAL COM   | application and the MMERCIAL   | City of New Bedfor   | rd ordinances.          | G.P.D.   |
| If applicant other than actual property owner, attach   | Letter of Authoriza  | tion from Property   | Owner.                  |  |
| Name  | ized to perform this   | work is:   |                         |  |
|   |  |  | Tel                     |  |
| Name Addres Type of Pipe Required:  |  | 55   |                         |  |
| PERMIT EXPIRES ONE YEAR AFTER DATE  |  |  |                         |  |
| Requires separate connections for sewage a  | nd storm drain whe   | re applicable. Stor  | m water cannot be disc  | charged to a   |
| <ul> <li>sanitary sewer.</li> <li>All work must be inspected and approved b</li> </ul>  | y a D.P.I. inspector   | hefore backfilling   |                         |  |
| <ul> <li>If this connection is to be part of a private s</li> </ul>   | ervice shared jointh   | y with other building  | ng owners, attach copy  | of Recorded  |
| Joint Maintenance Agreement.  |  |  |                         |  |
| Permits can be issued to Industrial and/or C  Public Value of the standard of the standar | Commercial Applica   | ints only upon recei   | pt and approval by the  | : Commissioner of  |
| <ul> <li>Public Infrastructure of required plans and s</li> <li>In addition, a City-issued Industrial User D</li> </ul>   | ischarge Permit and  | lor a Sewer Extens   | ion/Connection Permi    | t issued by the  |
| Commonwealth of Massachusetts D.E.P. sh   | nall be required by t  | he City for Industri   | al Discharge into the s | sewer system.  |
| Industrial User Discharge Permit No   |  | Date   |                         |  |
| Comm. Mass. Sewer Conn./Ext. Permit No  |  | Date   |                         | 984  |
| A Filing and Inspection Fee of \$1,000, plus an   | Entrance Fee of \$.  | where appli  | cable, must accompan    | y this application.  |
|   |  |  |                         |  |
| Bank# Chuc hue Check#_  | 1440   | Date U -   | Receipt                 | 10000  |
| Other requirements:   |  |  | \$ ***                  |  |
|   |  |  |                         |  |
|   |  |  |                         |  |
| Connection made to Part of  | jointly-shared priva   | ate line YES   | NO                      |  |
| Storm Drain   |  |  |                         | 100,000,000  |
|   | *  |  | - Cabo City of Now P    | adford and such  |
| Applicant agrees to abide by the above terms other special rules as the Commissioner of Po  | i, as well as all per  | e and/or City Eng  | ineer may deem nece     | essary   |
| Ma Jan A 1  |  |  |                         |  |
| - hill sail no hour All.  |  | Si-  |                         | - Depresentative   |
| City Engineer   |  | Signature  | of Property Owner o     | r Representative   |
| and Millitte Alle Millitte  | INSPECTOR'S  | REPORT   |                         |  |
|   |  |  |                         |  |
| INSPECTED BY: SEE WHITE SHEET DATE:   |  |  |                         |  |
| COMMENTS:   |  | m // //  | ///                     | 1135   |
|   |  | 1148   |                         | A particular of the state of th |
|   |  | 3  |                         | post/med<br>sed  |
| APPROVED DISAPPRO   | 00   | 1  | *                       | and also   |
|   | 15   | STONE AV   | The last                |  |
|   | So S   |  | 137                     | Day Feet   |
| SIGNATURE   | 1 1/   | (  |                         | Para Para Para Para Para Para Para Para  |
| SIGNATURE   |  |  |                         | Character  |
|   |  |  |                         | )   Williams   |
|   | - Internal Control   | Gravity M. Satte Water   |                         | 50 fe  |
|   | Manual Ma | ridain<br>mbined Sa<br>mbined Sa<br>mbined Sa<br>manined<br>leration |                         | ICh = Ichteest   |
|   | Strike Com   | 3 3 3 3 3 5 5 5  |                         | 1 I I  |

PERMIT NO. 24579



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

| This certifies that permission is granted to   |  |
|--|--|
| Property Owner Address Detroot MA  To connect a sewer and/or storm drain located at Eastland  Assessor's Plot . Lot. 68-1510, to the sewer and/or storm drain  | 102247 Tel. (508)294-1523  |
| To connect a sewer and/or storm drain located at Eastland  | Terrace (SS) 30' Wx lackdale   |
| Assessor's PlotLot. 68-150, to the sewer and/or storm drain  | n in Rockdalo Quenue Street  |
| To be laid in accordance with the conditions in this application and the TYPE OF USE; RESIDENTIAL COMMERCIAL   | City of New Bedford ordinances. INDUSTRIAL FLOW 3 G.P.D.   |
| If applicant other than actual property owner, attach Letter of Authoriz   | ation from Property Owner.   |
| The Bonded Contractor/Drain Layer authorized to perform th   | is work is:  |
| Name O CANCES Address Type of Pipe Required: PVC SDR   | Tel.   |
| PERMIT EXPIRES ONE YEAR AFTER DATE OF ISSUE  |  |
| Requires separate connections for sewage and storm drain wh  | ere applicable. Storm water cannot be discharged to a  |
| <ul> <li>sanitary sewer.</li> <li>All work must be inspected and approved by a D.P.I. inspector</li> </ul>   | or before backfilling  |
| If this connection is to be part of a private service shared join  | tly with other building owners, attach copy of Recorded  |
| Joint Maintenance Agreement.   |  |
| <ul> <li>Permits can be issued to Industrial and/or Commercial Applic</li> <li>Public Infrastructure of required plans and supplemental information</li> </ul> | rmation  |
| <ul> <li>In addition, a City-issued Industrial User Discharge Permit an</li> </ul>   | nd/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   | Datewhere applicable, must accompany this application.   |
| Bank# BANK Five Check# 1770  | Date 4-27-18 Receipt# 1654019  |
| Other requirements: FOR INSPECTION ONL NOTICE IS REQUIRED  | AND THE  |
| CONTRACTOR/APPLIC<br>REQUIRED TO NOTIFY  |  |
| Sewer @ 508 979-1550 Press 4 R   | Repair   |
| Connection made to P   | NO   |
| Storm Drain  |  |
| Applicant agrees to abide by the above terms, as well as all pe<br>other special rules as the Commissioner of Public Infrastructu                              | ertinent ordinances of the City of New Bedford, and such are and/or City Engineer may deem necessary |
| - Dhain Chase  | J. 600 1   |
| City Engineer  | Signature of Property Owner or Representative  |
| Admin manger INSPECTOR'S   | SREPORT  |
| INCORECTED BY.   |  |
| INSPECTED BY:  |  |
| COMMENTS:  |  |
|  |  |
|  |  |
| APPROVED DISAPPROVED   |  |
|  |  |
|  |  |
| SIGNATURE  |  |
|  |  |

SKETCH PLAN

PERMIT NO. 24579



1778-180 AM

Inspector.

Expires 427-19

CITY OF NEW BEDFORD
SEWER AND/OR STORM DRAIN PERMIT

DATE 4-27-18

| This certifies that permission is granted to   |   |
|--|---|
| Enc Meder (05 Lot) Hoth covery Rd  Property Owner Address Donarrowth M   | \$ 102747 Tel.  |
| To connect a sewer and/or storm drain located at East Cond.  Assessor's Plot . Lot. 68:1516, to the sewer and/or storm d   | rain in Rockdall Quence _street   |
| To be laid in accordance with the conditions in this application and TYPE OF USE; RESIDENTIAL COMMERCIAL   | the City of New Bedford ordinances.  INDUSTRIAL FLOW 320 G.P.D.   |
| The Bonded Contractor/Drain Layer authorized to perform  | this work is:   |
| Name O CANCESSA Address Type of Pipe Required: O' PVC SDR  | 35 Tel.   |
| PERMIT EXPIRES ONE YEAR AFTER DATE OF ISSUE  |   |
| Public Infrastructure of required plans and supplemental in  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.  A Filing and Inspection Fee of \$.450, plus an Entrance Fee of Some Inspection of Notice Is Required Contractor/Apple Required To Notice Is | ctor before backfilling. Sintly with other building owners, attach copy of Recorded Silicants only upon receipt and approval by the Commissioner of formation.  and/or a Sewer Extension/Connection Permit issued by the by the City for Industrial Discharge into the sewer system.  Date  Date  Bate  Character A 24 HOUR  ED AND THE  LICANT IS  FY THE D.P.I.  4 Repair  VEAR  NO |
| 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   |
| In m An do   | × /vr   |
| City Engineer  | Signature of Property Owner or Representative   |
| Mamin Manager INSPECTOR  | R'S REPORT  |
| A  | C O NET ON T  |
| INSPECTED BY: 4NTONIO 16MOS  DATE: 7 13 2018 + 7 16 2018   |   |
| COMMENTS:  MEN SERVICE 6 PVE + 60  |   |
| lu filtretion  |   |
| APPROVED DISAPPROVED   |   |
| Antinio Ina  |   |
| SIGNATURE  |   |

SKETCH PLAN

&%F25

### OUITCLAIM DEED

Briston South Resistry Dist

PEARL DONNENFELD, F/K/A PEARL VASCONCELLOS, TRUSTED OF ASTLAND: FARMS: NOMINEE REALTY TRUST u/d/t dated November 13, 1996 and recorded with the Bristol County (S.D.) Registry of Deeds in Book 3768, Page 251, of 759 CJC Hwy #375, Cohasset, Norfolk County, MA for consideration paid and in full consideration of Seventy Thousand and 00/100 (\$70,000.00) Dollars

grants to ERIC MEDEIROS, TRUSTEE OF DP EASTLAND FARMS REALTY TRUST, u/d/t dated April 3, 2018 and recorded herewith, 6A Hathaway Road, Dartmouth, Massachusetts, 02747, the property hereinafter described

#### with Quitclaim Covenants

The land, with buildings thereon, in New Bedford, Bristol County, Massachusetts, being described as:

Being shown as Map 74, Lot 163 on an Approval Not Required Plan entitled, "Approval Not Required Plan of Land in New Bedford, Massachusetts Prepared for Eastland Farms Nominee Realty Trust" prepared by SITEC, dated January 8, 2018 and recorded with said Registry in Plan Book 177, Page 62

Being a portion of the premises conveyed to this Grantor by deed of Carolyn Maguire, a/k/a Carolyn Maguire, et al dated October 31, 1996 and recorded in said Registry in Book 3768, Page 255. See also deed of RBB Development, LLC dated August 22, 2012 and recorded with said Registry in Book 10493, Page 8.

WITNESS my hand and seal this

ty L Clut

day of April, 2018.

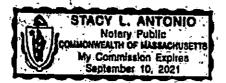
PEARL DONNENFELD, F/K/A PEARL VASCONCELLOS
TRUSTEE OF EASTLAND FARMS NOMINEE REALTY TRUST

Witness

### COMMONWEALTH OF MASSACHUSETTS

BRISTOL, SS.

| On th          | is day of April, 2018, 1     | perfore me, the undersigned notary public, personally |
|----------------|------------------------------|---|
| appeared PEA   | arl Donnenfeld, f/k/a Peai   | L VASCONCELLOS, whose identity was proved to me       |
| through        | Photo IP                     | to be the person whose name is                        |
| signed on the  | preceding or attached docum  | ent, and acknowledged to me that the signatory signed |
| it voluntarily | as Trustee of Eastland Farms | Nominee Realty Trust and as his and its free act and  |
| deed           |                              |   |



NOTARY PUBLIC My Commission Expires: Sept 10, 2021

### TRUSTEE'S CERTIFICATE

00007156

AZF 25

I, Pearl Donnenfeld, f/k/a Pearl Vasconcellos, Trustee of Eastland Farms Nominee Realty Trust u/d/t dated November 13, 1996 and recorded with the Bristol County (SD) Registry of Deeds in Book 3768, Page 251, of 759 CJC Hwy #375, Cohasset, Norfolk County, MA, hereby certify that:

- Said Trust is in full force and effect, and has not been amended or modified and has not been revoked as of the date hereof;
- 2. All of the beneficiaries of said Trust are of full age;
- 3. All of the beneficiaries of said Trust are competent; and



4. The undersigned has full power and authority and has been directed by all of the beneficiaries of said Trust who have consented to the transfer of the vacant land on Eastland Terrace, New Bedford shown as Map 74, Lot 163 on an Approval Not Required Plan dated January 8, 2018 and recorded with said Registry in Plan Book 177, Page 62 to Eric Medeiros, Trustee of DP Eastland Farms Realty Trust, for consideration of \$70,000.00, and in connection therewith to execute and deliver, on behalf of the Trust, any and all documents with respect to said transaction.

Signed under the penalties of perjury this 4th day of April, 2018.

EASTLAND FARMS NOMINEE REALTY TRUST

By its Trustee

PEARL DONNENFELD, F/K/A PEARL VASCONCELLOS

Commonwealth of Massachusetts

Bristol, ss

On this 4th day of April, 2018, before me, the undersigned notary public, personally appeared PEARL DONNENFELD, F/K/A PEARL VASCONCELLOS whose identity was proved to me through a Massachusetts Driver's License to be the person whose name is signed on the preceding or attached document, and acknowledged to me that the signatory signed it voluntarily as Trustee of Eastland Farms Nominee Realty Trust

STACY L. ANTONIO

Notary Public

COMMONWEALTH OF MASSACHUSETTS

My Commission Expires

September 10, 2021

NOTARY PUBLIC

MY COMMISSION EXPIRES: Sept 10, 2021

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



Installing Company Name: Robert J. Canessa

Address: P. O. Box 51643

#### **Commonwealth of Massachusetts**

## **City of New Bedford**

133 William Street New Bedford, MA 02740



License Type: DPI - Other

MA

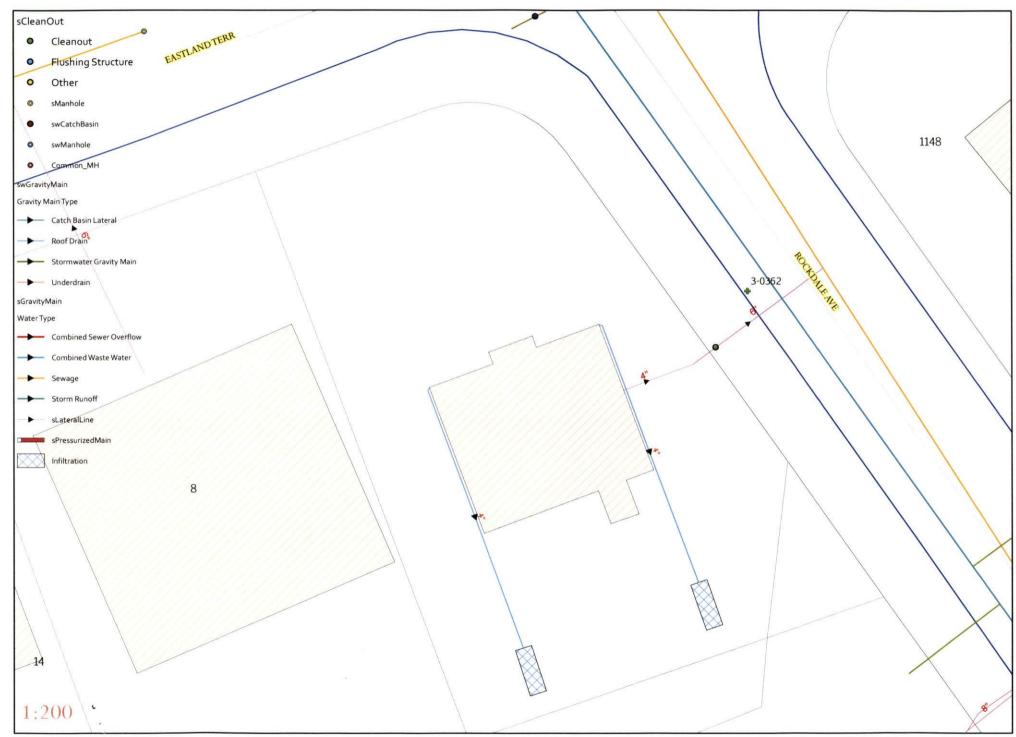
#### **SEWER PERMIT**

| Date: 5/25/2018   |                     | No. WW                 | -18-28              |  |  |  |
|---|---------------------|------------------------|---------------------|--|--|--|
|   |                     |                        |                     |  |  |  |
|   | Pipe Size:          | 0.00                   |                     |  |  |  |
| Sewer Connection Fee: \$450.00  | Trench Length       | 0.00                   |                     |  |  |  |
| Service Location: SS EASTLAND TER   | Owner Name:         | VASCONCELLOS PEA       | ARL,                |  |  |  |
| Type of Occupancy: Residential  | Type of Work:       | Sewer - New Sewer S    | ervice              |  |  |  |
| Work Description: SEWER PERMIT# 24579   |                     |                        |                     |  |  |  |
| p.74<br>I. 163 & 68-156   |                     |                        |                     |  |  |  |
| eASTALDN tERRACE ss 30' w X re  | OCKDALE aVE         |                        |                     |  |  |  |
| CONNECTING TO ROCKDALE AV   | ENUE                |                        |                     |  |  |  |
| No. of Units : 0 Required Design Daily Flow   | 0.00                | Provided Daily Flow :  | 0.00                |  |  |  |
| The undersigned petitions you to grant permission to hereby agrees to the following:  | ENTER INTO THE MAIN | SEWER and, if such per | mission is granted, |  |  |  |
| <ol> <li>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.</li> <li>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.</li> <li>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.</li> </ol> |                     |                        |                     |  |  |  |

City/Town/State: \_\_\_

**New Bedford** 

| Work Ord            | ler Numb                        | er: 18-009632  |            |             |                         |                      |       | 7/16/2018<br>7:52 AM |
|---------------------|---------------------------------|--|------------|-------------|-------------------------|----------------------|-------|----------------------|
| Category: S         | tegory: Service Lateral Gravity |  |            | F           | riority:                | 3 <u></u>            |       | 7.02 7117            |
| Problem:            | Contractor Ir                   | nspection  |            |             | Crew:                   |                      |       |                      |
| Cause:              |                                 |  |            |             | Supervisor:             | STEPHANIE DUPRAS     |       |                      |
| Main Zask: Ir       | nvestigate /                    | Inspect  |            |             | Status:                 | New Work Order       |       |                      |
| Work Order Start D  | ate/Time:                       |  |            | v           | Vork Order E            | End Date/Time:       |       |                      |
| Location (s)        |                                 |  |            |             |                         |                      |       |                      |
| EASTLAND TER        | 7                               |  |            |             |                         |                      |       |                      |
| Eastland Terrace S  |                                 | est<br>Rockdale Ave P. 74 L.1638   | 68-156 apt | 07/16/18 98 | am rj canessa           | a sewer permit#24579 |       |                      |
| Task Start Date/Tim | ne:                             |  |            | Task        | End Date/Ti             | ime:                 |       |                      |
| Task Code:          | SW                              | T220   | Task Des   | scription:  | : Investigate / Inspect |                      |       |                      |
|                     |                                 |  |            |             |                         | Time Type            |       |                      |
| Employee Number     |                                 | oyee Name  | Rec        |             | Normal                  | Type                 | Units |                      |
| 14950               | ANTO                            | ONIO LEMOS   | 0.0        | 0.00        | 0.00                    | REGULAR TIME         | Hours |                      |
|                     |                                 | and the second s |            |             |                         |                      |       | =                    |
|                     |                                 |  |            |             |                         | <u> </u>             |       | -                    |
|                     |                                 |  |            |             |                         |                      |       | -                    |
|                     |                                 |  |            |             |                         |                      |       |                      |
| Equipment Code      |                                 | Equipment Description  |            |             | _                       | Units                |       | -                    |
|                     |                                 |  |            |             |                         |                      |       |                      |
|                     | <u> </u>                        |  |            |             |                         | <u></u>              |       |                      |
|                     |                                 |  |            |             |                         |                      |       |                      |
|                     |                                 |  |            |             |                         | s :                  |       |                      |
|                     |                                 |  |            |             |                         |                      |       |                      |
| Material Code       |                                 | Material Description   |            |             |                         | <u>Units</u>         |       |                      |
|                     |                                 |  |            |             |                         |                      |       |                      |
|                     |                                 | -  |            |             |                         |                      |       |                      |
|                     |                                 |  |            |             |                         |                      |       |                      |
|                     |                                 |  |            |             |                         |                      |       |                      |
|                     | <u> </u>                        |  |            |             |                         |                      |       |                      |
| Fluid Code          |                                 | Fluid Description  |            |             |                         | <u>Units</u>         |       |                      |
|                     |                                 |  |            |             |                         |                      |       |                      |
|                     |                                 | ş  |            |             |                         |                      |       |                      |
|                     |                                 | 3  |            |             |                         |                      |       |                      |
|                     |                                 |  |            |             |                         |                      |       |                      |
|                     |                                 |  |            |             |                         |                      |       |                      |
| Info:               | Infi Ho                         | ation  |            |             |                         |                      |       |                      |
|                     | 2 set                           | -c   |            |             |                         |                      |       |                      |
|                     |                                 |  |            |             |                         |                      |       |                      |
|                     | OK.                             | Antonio Con  |            |             |                         |                      |       |                      |
|                     |                                 | 7/16/2018  |            |             |                         |                      |       |                      |



| Work                 | Order             | Number: 18-009531                         |                            |                   |                       |                      |                       | 7/12/2018<br>3:58 PM |
|----------------------|-------------------|---|----------------------------|-------------------|-----------------------|----------------------|-----------------------|----------------------|
| Category:            | Serv              | ice Lateral Gravity                       |                            | Pri               | ority:                |                      |                       | 0.007 111            |
| Problem:             | Loca              | te Request                                |                            | Cre               | ew:                   |                      |                       |                      |
| Cause:               | -                 |   |                            | Su                | pervisor:             | STEPHANIE DUPRAS     |                       |                      |
| Main Task:           | Inves             | stigate / Inspect                         |                            | Sta               | itus:                 | New Work Order       |                       |                      |
| Work Order St        | art Date/         | Time:                                     |                            | Wo                | ork Order E           | End Date/Time:       |                       |                      |
| EASTLAND             | on (s) —<br>D TER |   | ·                          |                   |                       |                      |                       |                      |
|                      |                   | n Request<br>T 74 LOT 163 INSPECTION SCHE | ED FOR7/13/18 @            | @ 11:00AN         | 1 CANESS              | 6A                   |                       |                      |
| Task Start Dat       | e/Time:           |   |                            | Task E            | nd Date/Ti            | me:                  |                       |                      |
| Task Code:           |                   | SWT220                                    | Task Descri                | ption:            | Investigate / Inspect |                      |                       | <del></del>          |
|                      |                   |   | ( Springer Company Company |                   | Time                  | е Туре               | _                     |                      |
| Employee Nu<br>14950 | mber              | Employee Name<br>ANTONIO LEMOS            | <u>Reg</u><br>0.00         | <u>OT</u><br>0.00 | Normal<br>0.00        | Type<br>REGULAR TIME | <u>Units</u><br>Hours |                      |
|                      |                   |   | ( <del></del>              | -                 |                       |                      |                       |                      |
|                      |                   |   |                            |                   |                       |                      |                       | -                    |
| Equipment Co         | <u>ode</u>        | Equipment Description                     |                            |                   |                       | <u>Units</u>         |                       |                      |
|                      |                   | _   |                            |                   |                       |                      |                       |                      |
| 6                    |                   |   |                            |                   |                       |                      |                       |                      |
| Material Code        | 2                 | Material Description                      |                            |                   |                       | <u>Units</u>         |                       |                      |
|                      |                   |   |                            |                   |                       |                      |                       |                      |
| Fluid Code           |                   | Fluid Description                         |                            | . 2018            |                       | <u>Units</u>         |                       |                      |
|                      |                   |   |                            |                   |                       |                      |                       |                      |
|                      |                   |   |                            |                   |                       |                      | _                     |                      |
| Info: o              |                   |   |                            |                   |                       |                      |                       |                      |
| YE                   | N 36              | eli et                                    |                            |                   |                       |                      |                       |                      |
| 6                    | Pre               | + 00                                      |                            |                   |                       |                      |                       |                      |
|                      |                   | Antonio Somo                              |                            |                   |                       |                      |                       |                      |
|                      |                   | 7/13/2018                                 |                            |                   |                       |                      |                       |                      |