



PERMIT NO.

24582

CITY OF NEW BEDFORD
SEWER AND/OR STORM DRAIN PERMIT

DATE 5/9/18

This certifies that permission is granted to

Property Owner

Address

Tel.

To connect a sewer and/or storm drain located at

Assessor's Plot 136 Lot 485, to the sewer and/or storm drain in KNA Dr 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 \$450, plus an Entrance Fee of \$ where applicable, must accompany this application.

Bank# Webster Bank Check# 71634 Date 5/1/18 Receipt# 1674135

Other requirements:

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

City Engineer

Signature of Property Owner or Representative

INSPECTOR'S REPORT

INSPECTED BY: SEE INSPECT SHEET

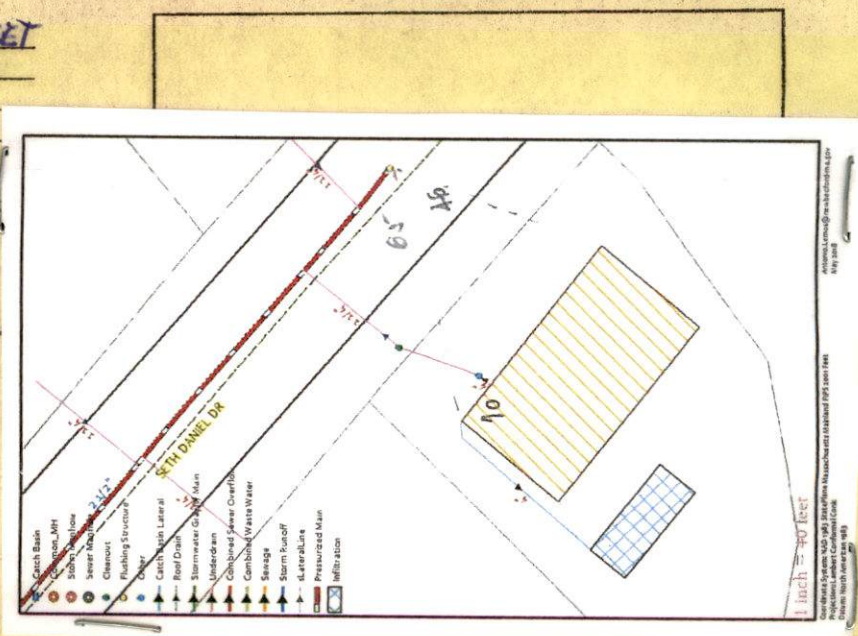
DATE:

COMMENTS:

APPROVED

DISAPPROVE

SIGNATURE



W62-18-19

EXP 5/9/19



PERMIT NO.
24582

CITY OF NEW BEDFORD
SEWER AND/OR STORM DRAIN PERMIT

DATE 5/9/18

This certifies that permission is granted to

Olson Development 70 Lambeth St.
Property Owner Address Tel.

To connect a sewer and/or storm drain located at Seth Daniel Dr (NS) 710 S x Rosa Dr.

Assessor's Plot 136 Lot 485, to the sewer and/or storm drain in Rosa Dr. 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:

CANESSA
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 \$ 450, plus an Entrance Fee of \$ _____ where applicable, must accompany this application.

Bank# Webster Bank Check# 71634 Date 5/9/18 Receipt# 1674135

Other requirements: _____
FOR INSPECTION ONLY A 24 HOUR NOTICE IS REQUIRED AND THE CONTRACTOR/APPLICANT IS REQUIRED TO NOTIFY THE D.P.I. @ 508 979-1550 Press 4 Repair

Connection made to Sewer Pa _____ O _____
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

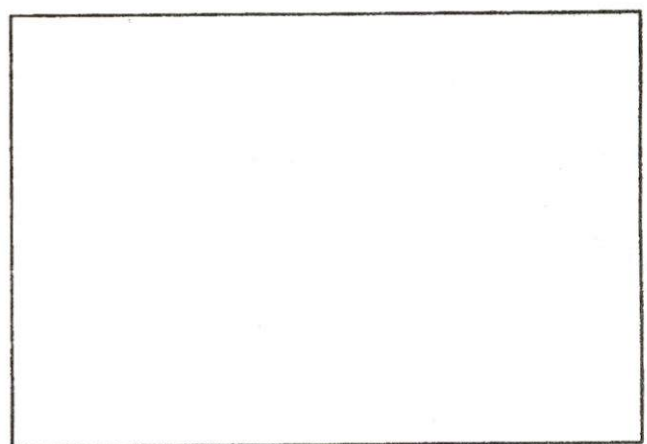
Norm M. Amato City Engineer
Admir Manager
P. Rosa Man Signature of Property Owner or Representative

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 5/6/18

24582

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.
 - 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# 102501 Bank Check# 7631 Date 5/6/18 Receipt# 1674135

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

Adam Manager
City Engineer

[Signature]
Signature of Property Owner or Representative

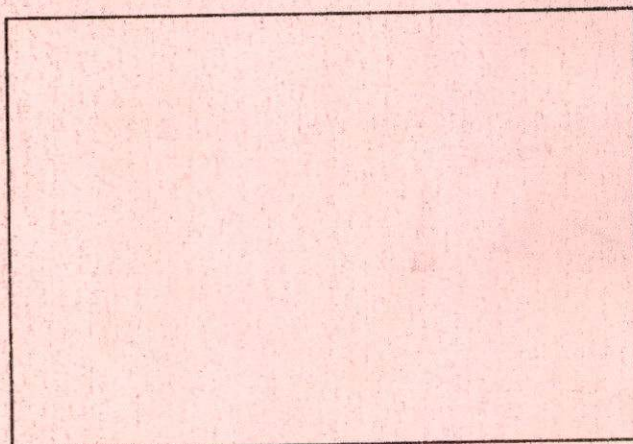
INSPECTOR'S REPORT

INSPECTED BY: SEE INSPECT. SHEET
DATE: _____
COMMENTS: _____

APPROVED

DISAPPROVED

SIGNATURE



SKETCH PLAN



City of New Bedford, MA

Building Division

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

RECEIPT

Sub comments attached
Final plan read in 2nd 5-9-18
Permitting (w/rev. det of 4-17-18) is on file with sister dept

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

Permit No #: TB-18-391	Date Received: 3/2/2018
Signature: Daniel P Moniz	Date: _____
Building Commissioner/Inspector of Buildings:	

SECTION 1 : SITE INFORMATION

1.1 Property Address 88 SETH DANIEL DR (W.S.) 710'S. & ROSA DR.	1.2 Assessors Map & Parcel Number 136-485 ✓
1.3 Zoning Information RA Zoning District	1.4 Property Dimensions 229139 Lot Area
Proposed Use	Frontage (ft)

1.5 Building Setbacks (ft)					
Front Yard		Side Yard		Rear Yard	
Required	Provided	Required	Provided	Required	Provided
25.00	20.00	25.00	210.00	25.00	110.00
1.6 Water Supply	False	1.7 Flood Zone Information	1.8 Sewage Disposal False		

SECTION 2: PROPERTY AUTHORIZED AGENT

Agent of Record					
Daniel P Moniz	70 Lambeth Street	New Bedford	MA	02745	
Name	Address				

SECTION 3: Description of Proposed Work

Permit For: Foundations Only 1-2 Family - 100.00
Brief Description of Proposed Work: Foundation m.s. Map 136 Lot 485

ck. ownership!
DPM DEV. CORP. (as of 3/1/18)
(Some of these lots are undergoing ownership changes - please ck. Carel.)

SECTION 4: Estimated Construction Costs / Permit Fees

Total Project Cost : \$10,000.00	Payment Date	Amount Paid	Check No
Total Permit Fee Paid: \$0.00			
Account Number: 02401200-453010 ISPBPM			

THIS IS NOT A PERMIT



CITY OF NEW BEDFORD
DEPARTMENT OF PUBLIC INFRASTRUCTURE
1105 Shawmut Avenue, New Bedford, MA 02746

Date: 5/9/18 20

TO: DPI

FROM: Dan Development Corp.
Sewer permit # 24589.

CHARGE CODE: DPI Sewer

ACCOUNT: 089D0000-422185

Initials: (DR)
DEPOSIT \$ 450 CE # 7034

White & Yellow/Treasurer's Copy • Pink/Department Copy

DPM DEVELOPMENT CORP.
70 LAMBETH STREET
NEW BEDFORD, MA 02745

WEBSTER BANK
3 EASTON, MA 02376

7634

53-7023/2113
678

5/9/2018

PAY TO THE ORDER OF CITY OF NEW BEDFORD

\$ **450.00

Four Hundred Fifty and 00/100

DOLLARS

CITY OF NEW BEDFORD

MEMO

Sewer Permit #485 Seth Daniel Dr

Rosa M...
AUTHORIZED SIGNATURE

⑈007634⑈ 1:214370231:10 0133001164⑈

Work Order Number: 18-007401

5/24/2018
2:23 PM

Category: Service Lateral Gravity Priority: _____
Problem: Locate Request 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)

SETH DANIEL DR

Comments from Request

sewer inspection sched for 5/25/18 @ 1:00pm (sewer # 24582 plot 136 lot 485)

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: 18-007690

6/1/2018
7:43 AM

Category: Service Lateral Gravity Priority: _____
Problem: Locate Request 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) _____
483 SETH DANIEL DR

Comments from Request _____
483,484,485 SETH DANIEL DR , INSPECT/ CHECK THE INFILTRATORS FOR DAN MONIZ 508-294-7974

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
------------	-------------------	-------

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

MAP 136
LOT 485
229,139 S.F.

EXISTING
FOUNDATION
TOF: 118.22'

S 44°37'52" W 149.24'

MAP 136
LOT 486

66.61'
S 50°00'52" E

SETH DANIEL
DRIVE
(PRIVATE - 50' WIDE)

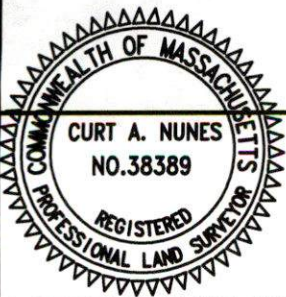
L=142.05'
R=150.00'

MAP 136
LOT 484

MAP 136
LOT 483

AS BUILT FOUNDATION PLAN - MAP 136 LOT 485

SETH DANIEL DRIVE
IN
NEW BEDFORD, MA



I CERTIFY THAT THE FOUNDATION SHOWN
HEREON, AS BUILT, CONFORMS TO THE CITY
OF NEW BEDFORD ZONING SETBACK
REQUIREMENTS.

PROFESSIONAL LAND SURVEYOR

DATE

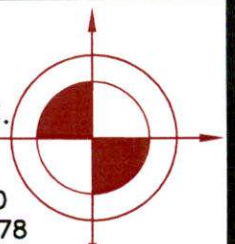
DATE: MAY 7, 2018

SCALE: 1" = 30'

ROMANELLI ASSOCIATES INC.
PROFESSIONAL LAND SURVEYORS

1162 Rockdale Ave. New Bedford, MA 02740
Phone (508) 995-0100 - (508) 995-6678

WWW.ROMANELLI-INC.COM



JN 16-088

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-18-9**

Sewer Connection Fee: **\$450.00**

Pipe Size: **0.00**

Trench Length: **0.00**

Service Location: **NS SETH DANIEL DR**

Owner Name: **MONIZ PROPERTIES INC**

Type of Occupancy: **Residential**

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

Work Description: **sewer permit # 24561**

**P. 136
L.29**

Seth Daniel Dr Ns x Cul De Sac 212' N x Rosa Drive

new build

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



Inspection 5/25 @ 1:00 PM 5/19/18

PERMIT NO.

24582

CITY OF NEW BEDFORD
SEWER AND/OR STORM DRAIN PERMIT

DATE 5/1/18

This certifies that permission is granted to

Dpm Development 70 Lambeth St.

Property Owner

Address

Tel.

To connect a sewer and/or storm drain located at: Seth Daniel Dr (NS) 710 S x ROSA Dr.

Assessor's Plot 136 Lot 485, to the sewer and/or storm drain in: ROSA Dr. 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

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Name Address Tel.

Type of Pipe Required: PVC

PERMIT EXPIRES ONE YEAR AFTER DATE OF ISSUE

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Comm. Mass. Sewer Conn./Ext. Permit No. Date

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Bank# Webster Bank Check# 71034 Date 5/1/18 Receipt#

Other requirements: FOR INSPECTION ONLY A 24 HOUR NOTICE IS REQUIRED AND THE CONTRACTOR/APPLICANT IS REQUIRED TO NOTIFY THE D.P.I. @ 508 979-1550 Press 4 Repair

Connection made to Sewer Storm Drain Pa O

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

Antonio Lemos City Engineer p. Rosa Manager Signature of Property Owner or Representative

INSPECTOR'S REPORT

INSPECTED BY: Antonio Lemos

DATE: 5/25/2018

COMMENTS:

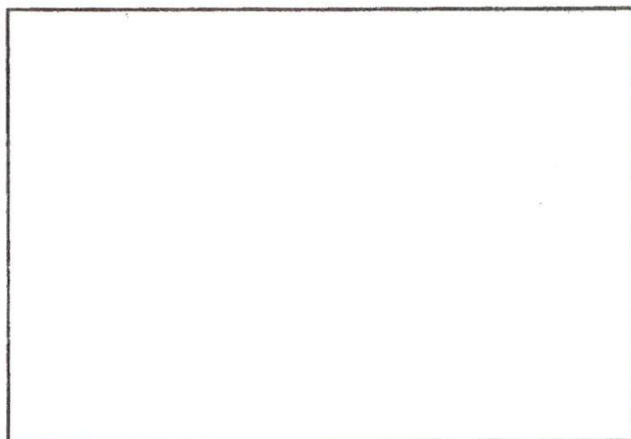
NEW SERVICE
CON PRESSURE 1 1/4" + CO + Pump.

APPROVED

DISAPPROVED

Antonio Lemos

SIGNATURE



SKETCH PLAN