Expures 6/12/19





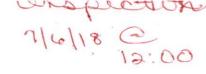
CITY OF NEW BEDFORD

DATE 6 12 18

24589

SEWER AND/OR STORM DRAIN PERMIT This certifies that permission is granted to hund meddemanned is showing him New Bed Tel. 508 . 9" **Property Owner** 17-9680 To be laid in accordance with the conditions in this application and the City of New Bedford ordinances. FLOW COMMERCIAL INDUSTRIAL TYPE OF USE: (RESIDENTIAL) If applicant other than actual property owner, attach Letter of Authorization from Property Owner. The Bonded Contractor/Drain Layer authorized to perform this work is: Address Name Type of Pipe Required: 5.5.2.3.5. 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 \$14.50.40 plus an Entrance Fee of \$...... where applicable, must accompany this application. Date 6/12/18 Receipt# 171 (0014 Bank# Bany of America Check# 15695 Other requirements: Sewer YES (Part of jointly-shared private line 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 manuel Signature of Property Owner or Representative City Engineer INSPECTOR'S REPORT INSPECTED BY: SEE WHITE SHEET DATE: COMMENTS: DISAPPRO\ APPROVED 243 SIGNATURE

PERMIT NO.



Expires 6/12/19

DATE 6 12 18

24589

	CITY OF	NEW B	EDFORE	
SEWER	AND/OF	STORN	I DRAIN	PERMIT

This certifies that permission is granted to
Property Owner Address Tel. 508. 977-9680
To connect a sewer and/or storm drain located at 18 Shooly him. Assessor's Plot 73 Lot 35, to the sewer and/or storm drain in Ookdale H. Street
Assessor's Plot 73 Lot 35, to the sewer and/or storm drain in Ookdale 51. 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 Type of Pipe Required: SDR 3.5
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
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 Deputy Commissioner INSPECTOR'S REPORT
INSPECTED BY: ANTONIO LEMOS DATE: 7 06 2018 COMMENTS: Houdenment of Septic System Ga Die + CO APPROVED DISAPPROVED
Antinio Lines SIGNATURE

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 PERMIT EXPIRES 1 YEAR

SKETCH PLAN



CITY OF NEW BEDFORD SEWER AND/OR STORM DRAIN PERMIT

DATE 6/12/18

24589
This certifies that permission is granted to

Property Owner		18 Shac	dy hm.		bedtor	
To connect a sewer and/or storm	n drain located atl	8 Shad	yhn		Zisv-VI	So -00
To connect a sewer and/or storm	35, to the sewer	and/or storm dra	in in Oak	dale	HE -	Street
To be laid in accordance with the TYPE OF USE: RESIDENT		pplication and th IMERCIAL	e City of New Bedf INDUSTRIAL		es. FLOW	G.P.D.
If applicant other than actual pro	operty owner, attach l	Letter of Authori	zation from Propert	y Owner.		
Name	r/Drain Layer authori	zed to perform the	nis work is:			
Name Type of Pipe Required	Address	,		Te	1	
PERMIT EXPIRES ONE YEA	AR AFTER DATE	OF ISSUE				33
Requires separate conn sanitary sewer.	ections for sewage ar	nd storm drain wi	here applicable. Sto	orm water car	not be disch	arged to a
Connection made to	be part of a private seement. o Industrial and/or Coff required plans and sed Industrial User Dissachusetts D.E.P. shadermit No	ervice shared join ommercial Application of the supplemental information of the scharge Permit at all be required by the scharge Permit at all be required by the scharge Fee of the sch	cants only upon recommation. Ind/or a Sewer Exter the City for Industry the City for In	eipt and appropriate and appro	coval by the Cotton Permit is the into the seven accompany (Commissioner of issued by the wer system. this application.
manuel	H. Cil-6		Clawatum	Proper	Owner	Representative
Deputy Com	Missimer		Signatur	e of Troper	, Owner or	Representative
1		INSPECTOR'	S REPORT			
DATE:COMMENTS:						
APPROVED	DISAPPROVI	ED				
SIGNAT	URE					
D201112						

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 PERMIT EXPIRES 1 YEAR

SKETCH PLAN

No. <u>18-06</u>		FEE 60
	COMMONWEALTH OF MASSACHUSETTS	

Board of Health, Lew Bodgood, MA. DISPOSAL SYSTEM CONSTRUCTION PERMIT

Permission is hereby granted to; Construct() Repair() Upgrade() Abandon()	an individual sewage disposal system
	as described in the application for
Disposal System Construction Permit No. 18-06, dated 6/13/18.	
	ATT 1 100 - 11 - 1

Date 6/13/18 Board of Health

Form 1255 Rev. 5/96 A.M. Sulkin Co. Boston, MA

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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: 6/2	22/2018					No.	W۷	V-18-41	
		× 0 0 0			Pipe Size:		0.00		
Sewer Co	onnection Fee:	\$450.00			Trench Length:		0.00	Ĺ	
Service Location:	18 SH	IADY LN			Owner Name:	BETTENCOL	JRT LUI	S RANDRE	-0
Type of Occupancy:	Residentia	al			Type of Work:	Sewer - Nev	v Sewer	Service	
Work Description:	sewer# 245	89							
	P.73 L.35								
	18 Shady La	ane							
	expires 06/1	12/19							
No. of Units :	0	Required Design	gn Daily Flow :		0.00	Provided Daily Flo	w:	0.00	
The undersigned hereby agrees			rmission to ENT	TER INTO	THE MAIN	SEWER and, i	f such p	e <mark>rmissi</mark> on is grante	ed,
ordina 2. That Public 3. That autho permittee	ance now in fo the connection c Works or by the work shall prized agent, a	rce, or as am n of said sewe a designated at all times b nd that any ex	agent of the To	e to time. In sewer shown before ection and If by the To	all be inspect burial of sa	eted by an emp id connection. ne Commission	loyee of er of Pu	the department of	22000
Installing Company N	Name: Nelson	Cardoso				License Ty	pe: H	pisting Engineer	
Address: PO Box			City/Town/State:	Acushn	et	MA_	po-5-511		

DISPLAY PERMIT IN A CONSPICUOUS PLACE ON THE PREMISES

DIA CONTROL OF THE PARTY OF THE

Commonwealth of Massachusetts

City of New Bedford

133 William Street New Bedford, MA 02740



SEWER PERMIT

GRANTED WITH THE USUAL CONDITIONS

COMMISSIO	NER	

LUIS R BETTENCOURT		And the second s	/ 56	Parline Contractor
IDALECIA M. ANDRE		6/12/2		0 MA 26738
NEW BEDFORD, MA 02740-1850	^*~~\\	0-1-1-	Date	an ended
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Work*		Number: 18-009182						7/6/20 11:49 A
Problem:	-	te Request		-	iority: ew:			
Cause:	Loca	ic request		erri	pervisor:	STEPHANIE DUPRAS		
Main Task:	Inspe	ection			atus:	New Work Order		
Work Order Sta						nd Date/Time:		
Location 18 SHADY LN								
		n Request FOR NELSON CARDOSO	TODAY ASAP SEWE	ER PERI	ЛІТ #24 589			
Task Start Date/	/Time:			Task E	nd Date/Ti	ne:		
Task Code:		SWT180	Task Descrip	tion:	Inspecti	on		
					Time	Туре		
Employee Num 14950	ber	Employee Name ANTONIO LEMOS	Reg 0.00	<u>OT</u> 0.00	Normal 0.00	Type REGULAR TIME	<u>Units</u> Hours	
								_
				_				_
Equipment Cod	<u>le</u>	Equipment Descri	ption			<u>Units</u>		
Material Code		Material Description	<u>on</u>			<u>Units</u>		
Fluid Code		Fluid Description				<u>Units</u>		
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