

SERVICE 34038

NEW BEDFORD WATER WORKS

APPLICATION FOR SERVICE AND METER

NEW BEDFORD

I HEREBY ACKNOWLEDGE the receipt of a copy of the Regulations prescribed in the Ordinance of the City, for the use of Water, and I request that the water may be furnished through a

1" inch copper meter at MacArthur Dr (WS) 35' S x
Fairhaven Bridge (Front St Pump Station)

at such rates as may from time to time be established by the City.

I hereby agree to pay promptly the bill for the Service pipe laid down for my premises, and to pay all dues for water, and I agree to conform to the said Regulations and to all provisions of the Water Ordinances, until written notice is given by me or my agent to cut off the supply.

P. 53

L. 10,260, 261

TELEPHONE

(508) 779-1550

City of NB wastewater
105 Shawmut Ave
NB MA 02746

Service laid

Size and kind of pipe

From

Turned on

Reading

Building rates

Cost of Service

31-727

St.

Meter Set

Location

Paid

Paid

See attached plans

WES construction corp

Neil Schwartz (Pit manager)

508 328-3900

WJD Industrial Dr.
Hartford MA 06135

LAY PERMIT IN A CONSPICUOUS PLACE ON THE PREMISES



Commonwealth of Massachusetts

City of New Bedford

133 William Street New Bedford, MA 02740

WATER SERVICE PERMIT



Date: 4/1/2019

No. **W-19-9**

Permit Fee: \$0.00

Service Location: 249 MACARTHUR DR

Owner Name: CITY OF NEW BEDFORD INTER

Owner Phone #: (508) 979-1550

Type of Occupancy: Municipal

Type of Work: Water - Domestic New 1"

Work Description: water service#34038

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L70,260,261

Macarthur Dr WS 35' S x Fairhaven Bridge (Front St Pump station)

Contractor

Name: _____ Certificate #: _____ Type of Business : _____

Address: _____ City/Town/State: _____ Phone #: _____

Type of Service Pipe Size Trench Length: **0.00**

Fire Service _____

Domestic Service _____

Estimated consumption of water

Estimated average daily consumption 0.00 gallons

Cross Connection? **No**

Estimated maximum day consumption 0.00 gallons

Right of Way? **No**

Are lawn sprinklers and/or lawn irrigation proposed on site? **No**

Meter Impact? **No**

Estimated fire flows required for the project site: 0.00

Street Opening Permit Required? **No**

Does the project require a fire suppression system? **No**

Required minimum static pressure for the proposed project site 0.00

Call Phone: (781) 942-9077 For Inspection



**CDM
Smith**
260 West Exchange Street, Suite 300
Providence, RI 02903
Tel: (401) 751-5360

PROJECT NO. 0309-219437
FILE NAME: C006STPL.DWG
SHEET NO.
C-6

CONFORMED DRAWING