



Massachusetts Department of Environmental Protection

Bureau of Resource Protection - Wetlands

City/Town

WPA Form 1- Request for Determination of Applicability

Massachusetts Wetlands Protection Act M.G.L. c. 131, §40

A. General Information

Important:

When filling out forms on the computer, use only the tab key to move your cursor - do not use the return key.



1. Applicant:

Jonah Mikutowicz

Name

jonah.mikutowicz@agmmarine.com

E-Mail Address

30 Echo Road

Mailing Address

Mashpee

City/Town

MA

State

02649

Zip Code

508-477-8801

Phone Number

Fax Number (if applicable)

2. Representative (if any):

AGM Marine Contractors, Inc.

Firm

Richard FitzGerald

Contact Name

richard.fitzgerald@agmmarine.com

E-Mail Address

30 Echo Road

Mailing Address

Mashpee

City/Town

MA

State

02649

Zip Code

508-314-3440

Phone Number

Fax Number (if applicable)

B. Determinations

1. I request the New Bedford make the following determination(s). Check any that apply:
Conservation Commission

- ☐ a. whether the **area** depicted on plan(s) and/or map(s) referenced below is an area subject to jurisdiction of the Wetlands Protection Act.
- ☐ b. whether the **boundaries** of resource area(s) depicted on plan(s) and/or map(s) referenced below are accurately delineated.
- ☒ c. whether the **work** depicted on plan(s) referenced below is subject to the Wetlands Protection Act.
- ☒ d. whether the area and/or work depicted on plan(s) referenced below is subject to the jurisdiction of any **municipal wetlands ordinance** or **bylaw** of:

City of New Bedford

Name of Municipality

- ☐ e. whether the following **scope of alternatives** is adequate for work in the Riverfront Area as depicted on referenced plan(s).



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C. Project Description

1. a. Project Location (use maps and plans to identify the location of the area subject to this request):

7 Fish Island, South Side

Street Address

60

Assessors Map/Plat Number

New Bedford

City/Town

4

Parcel/Lot Number

- b. Area Description (use additional paper, if necessary):

The area of the work is on the Northeast portion of Fish Island where an existing 100'x30' building was recently demolished. The building demolition was approved by the Conservation Commission in May 2019. A 30'x48' portion of the building's concrete slab foundation remains. The foundation is about 30' from a stone bulkhead and water.

The lot area is approximately 1.6 acres and is used as a waterfront facility for marine construction and for berthing of fishing and commercial vessels.

- c. Plan and/or Map Reference(s):

Locus Plan

Title

Nov. 21, 2019

Date

Proposed Office, Storage and Electrical Service Conex Container Buildings

Title

Nov. 21, 2019

Date

Elevation Certificate

Title

Nov. 21, 2019

Date

2. a. Work Description (use additional paper and/or provide plan(s) of work, if necessary):

The work includes installing four 8'x20' conex containers on the demolished building slab foundation. Two containers will be 1 person offices, 1 for storage and 1 for electrical service shelter. The original electrical service for this area of Fish Island was located in the demolished building. The office containers will be stacked on top of the storage and electrical service containers. A timber stairway and 8'x20' elevated deck will be used to access the offices. A 52' longl x 2' wide x 4'high concrete block retaining wall will be installed to account for the building demolition and resulting change in the ground elevation. Please see the attached drawing.



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C. Project Description (cont.)

b. Identify provisions of the Wetlands Protection Act or regulations which may exempt the applicant from having to file a Notice of Intent for all or part of the described work (use additional paper, if necessary).

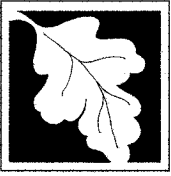
Per Section 10.57 (4)(a)(1-3) the demolition of the building and installation of the conex containers does not measurably affect the flood storage volume or water flow. Also there is no change in use from the original building with a much smaller footprint.

Though Fish Island is in an AE Flood Zone with an elevation of 6' NAVD88, the elevation of the concrete slab foundation was determined to be 8.52' NAVD88, above the flood elevation. See attached Elevation Certificate.

3. a. If this application is a Request for Determination of Scope of Alternatives for work in the Riverfront Area, indicate the one classification below that best describes the project.

- ☐ Single family house on a lot recorded on or before 8/1/96
- ☐ Single family house on a lot recorded after 8/1/96
- ☐ Expansion of an existing structure on a lot recorded after 8/1/96
- ☐ Project, other than a single family house or public project, where the applicant owned the lot before 8/7/96
- ☐ New agriculture or aquaculture project
- ☐ Public project where funds were appropriated prior to 8/7/96
- ☐ Project on a lot shown on an approved, definitive subdivision plan where there is a recorded deed restriction limiting total alteration of the Riverfront Area for the entire subdivision
- ☐ Residential subdivision; institutional, industrial, or commercial project
- ☐ Municipal project
- ☐ District, county, state, or federal government project
- ☐ Project required to evaluate off-site alternatives in more than one municipality in an Environmental Impact Report under MEPA or in an alternatives analysis pursuant to an application for a 404 permit from the U.S. Army Corps of Engineers or 401 Water Quality Certification from the Department of Environmental Protection.

b. Provide evidence (e.g., record of date subdivision lot was recorded) supporting the classification above (use additional paper and/or attach appropriate documents, if necessary.)



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D. Signatures and Submittal Requirements

I hereby certify under the penalties of perjury that the foregoing Request for Determination of Applicability and accompanying plans, documents, and supporting data are true and complete to the best of my knowledge.

I further certify that the property owner, if different from the applicant, and the appropriate DEP Regional Office were sent a complete copy of this Request (including all appropriate documentation) simultaneously with the submittal of this Request to the Conservation Commission.

Failure by the applicant to send copies in a timely manner may result in dismissal of the Request for Determination of Applicability.

Name and address of the property owner:

John Mikutowicz / Fish Island Nominee Trust

Name

30 Echo Road

Mailing Address

Mashpee

City/Town

MA

State

02649

Zip Code

Signatures:

I also understand that notification of this Request will be placed in a local newspaper at my expense in accordance with Section 10.05(3)(b)(1) of the Wetlands Protection Act regulations.

John Mikutowicz (on behalf of John Mikutowicz) 12/5/19
Signature of Applicant Date

John Mikutowicz 12/5/19
Signature of Representative (if any) Date



**CITY OF NEW BEDFORD
MASSACHUSETTS**

**CONSERVATION COMMISSION
2018 FILING FEE CALCULATION WORKSHEET***

PROJECT LOCATION:

7 Fish Island MAP 60 LOT(S) 4

APPLICANT: Jonah Mikutowicz

CONSERVATION COMMISSION FEES (check all that apply):

- (☒) REQUEST FOR DETERMINATION OF APPLICABILITY
- (☐) NOTICE OF INTENT
- (☐) AMENDED ORDER OF CONDITIONS
- (☐) EXTENSION PERMIT
- (☐) CERTIFICATE OF COMPLIANCE
- (☒) AFTER THE FACT FILING

(A.) ALTERATION FEES:

Application and field review of a project proposed in a Wetland Resource Area or its Buffer Zone is \$200.00 plus the applicable alteration fee as follows

	<u>AMOUNT DUE</u>
• Application and Field Review Fee (\$200.00)	<u>\$200.00</u>
• \$0.50 X _____ SF Wetland Resource Area Fee shall not exceed \$2,000.00 per project	/ \$ _____
• \$0.05 X <u>584</u> SF Land Subject Coastal Flooding Fee shall not exceed \$500.00	\$ <u>29.20</u>
• \$0.50 X _____ SF Developed Riverfront Area Fee shall not exceed \$1,500.00	\$ _____
• \$1.00 X _____ SF Undeveloped Riverfront Area Fee shall not exceed \$2,000.00	\$ _____
• \$5.00 X _____ LF Coastal or Inland Bank Fee shall not exceed \$750.00	\$ _____
• \$0.10 X _____ SF Buffer Zone Fee shall not exceed \$6,500.00	\$ _____

(B.) EXTENSION of an Order of Conditions:

- Single Family Dwelling or minor project (house addition, in ground pool etc)
\$300.00 \$ _____
- Subdivision/Commercial 600.00 \$ _____

(C.) AMENDING AN ORDER OF CONDITIONS:

- Single family dwelling or minor project (house, in ground pool etc)
\$300.00 plus new alteration fee – refer to (A) above \$ _____
- Subdivision/Commercial \$1,000.00 plus new alteration fee – refer to (A) above
\$ _____

(D.) WETLAND DELINEATION VERIFICATION (WITH OR WITHOUT A PROPOSED ALTERTATION)

- ½ acre or less \$250.00 \$ _____
- ½ acre to 2 acres \$500.00 (\$100.00/acre thereafter)
not to exceed \$3,500.00 \$ _____

(E.) DOCKS:

- \$100.00 + \$10.00 X _____ LF of dock \$ _____

(F.) CERTIFICATES OF COMPLIANCE

- One new house \$250.00 \$ _____
- One activity at an existing house \$200.00 \$ _____
- Commercial & Industrial Facilities \$1,500.00 \$ _____
- New Roadways 1,500.00 \$ _____

Partial Certificates of Compliance are the same fee as a Certificate of Compliance

(G.) AFTER THE FACT FILING FEE

- \$500.00 for a Notice of Intent or Amended Order of Conditions \$ _____
- \$250.00 for a Request for Determination of Applicability \$ 250.00

TOTAL AMOUNT DUE (including after-the-fact fee if applicable): \$ 479.20

Notes:

* Please refer to the Conservation Commission Fee Schedule – dated 8/2018

Please make check or Money Order payable to: THE CITY OF NEW BEDFORD.
Cash is not accepted.



City of New Bedford

REQUEST for a CERTIFIED ABUTTERS LIST

This information is needed so that an official abutters list as required by MA General Law may be created and used in notifying abutters. You, as applicant, are responsible for picking up and paying for the certified abutters list from the assessor's office (city hall, room #109).

DEC 05 2019

SUBJECT PROPERTY			
MAP #	60	LOT(S)#	4
ADDRESS: 7 Fish Island, New Bedford			
OWNER INFORMATION			
NAME: John Mikutowicz			
MAILING ADDRESS: 30 Echo Road, Mashpee, MA 02649			
APPLICANT/CONTACT PERSON INFORMATION			
NAME (IF DIFFERENT): Richard FitzGerald			
MAILING ADDRESS (IF DIFFERENT):			
TELEPHONE #	508-314-3440		
EMAIL ADDRESS:	richard.fitzgerald@agmmarine.com		
REASON FOR THIS REQUEST: <i>Check appropriate</i>			
<input type="checkbox"/>	ZONING BOARD OF APPEALS APPLICATION		
<input type="checkbox"/>	PLANNING BOARD APPLICATION		
<input checked="" type="checkbox"/>	CONSERVATION COMMISSION APPLICATION		
<input type="checkbox"/>	LICENSING BOARD APPLICATION		
<input type="checkbox"/>	OTHER (Please explain):		

Once obtained, the Certified List of Abutters must be attached to this Certification Letter.

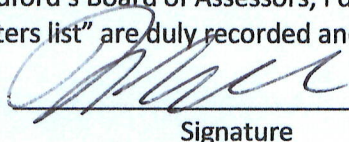
Submit this form to the Planning Division Room 303 in City Hall, 133 William Street. You, as applicant, are responsible for picking up and paying for the certified abutters list from the assessor's office (city hall, room #109).

Official Use Only:

As Administrative Assistant to the City of New Bedford's Board of Assessors, I do hereby certify that the names and addresses as identified on the attached "abutters list" are duly recorded and appear on the most recent tax.

Michael J. Motta

Printed Name



Signature

12-5-2019

Date

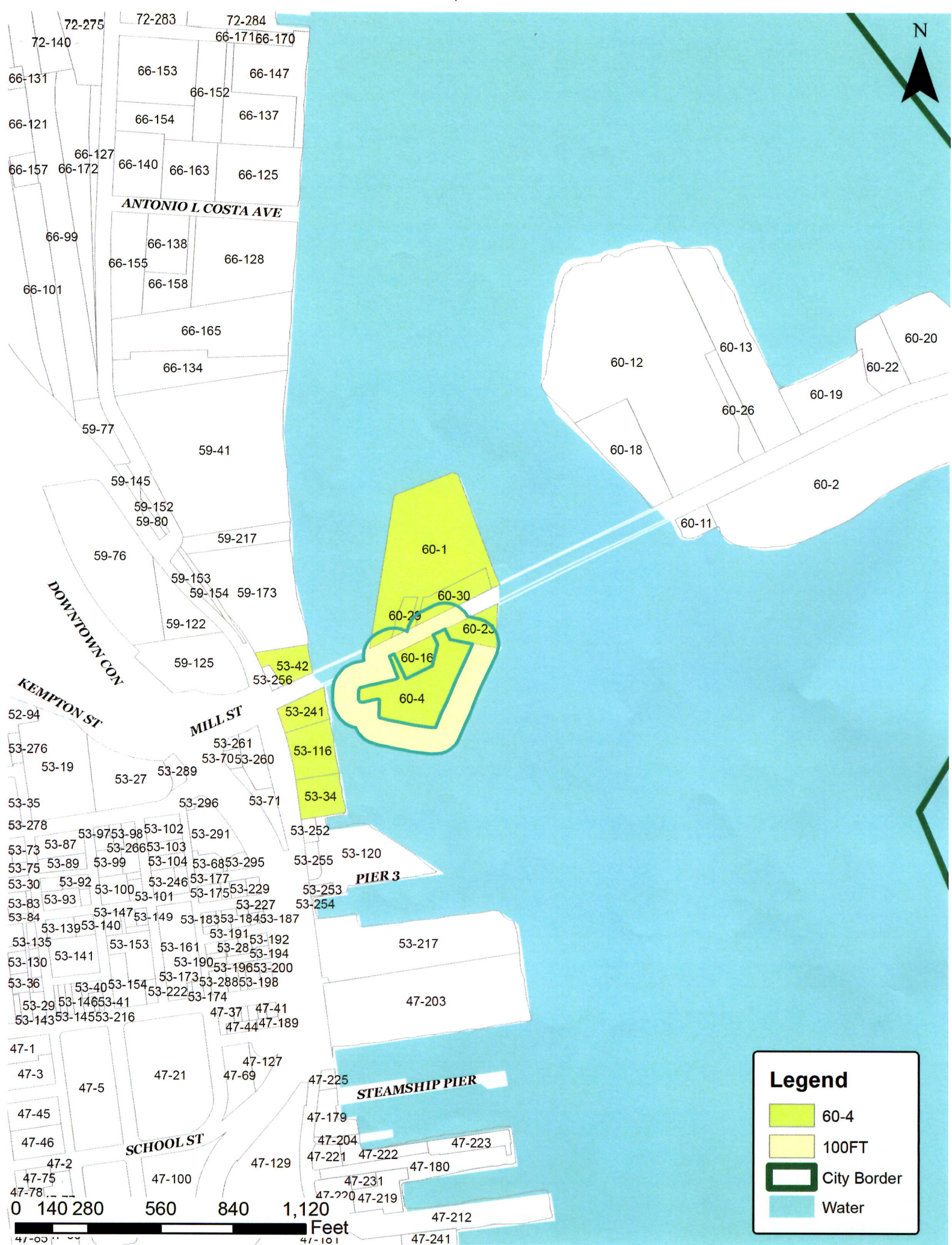
December 5, 2019

Dear Applicant,

Please find below the List of Abutters within 100 feet of the property known as 7 Fish Island (Map: 60, Lot: 4). The current ownership listed herein must be checked and verified by the City of New Bedford Assessor's Office. Following said verification, the list shall be considered a Certified List of Abutters.

Please note that multiple listed properties with identical owner name and mailing address shall be considered duplicates and shall require only 1 mailing. Additionally, City of New Bedford-Owned properties shall not require mailed notice.

<u>Parcel</u>	<u>Location</u>	<u>Owner and Mailing Address</u>
53-34	101 CO-OP WHARF	LIARIKOS JOHN G II "TRUSTEE", CO-OP WHARF REALTY TRUST 101 CO-OP WHARF NEW BEDFORD, MA 02740
53-241	252 ^R MACARTHUR DR	178 FRONT STREET CORPORATION, 252 R MACARTHUR DRIVE NEW BEDFORD, MA 02740
53-42 ^{ES}	MACARTHUR DR	MARITIME TERMINAL INC, P O BOX 7745 NEW BEDFORD, MA 02742
60-16 ^{SS}	FISH ISLAND	ONE FISH REALTY TRUST LLC, 30 ECHO ROAD MASHPEE, MA 02649
60-4 ^{SS}	FISH ISLAND	MIKUTOWICZ JOHN `TRUSTEE`, FISH ISLAND NOMINEE TRUST 30 ECHO ROAD MASHPEE, MA 02649
60-23 ^{SS}	FISH ISLAND	NORDIC REALTY LLC, P O BOX 902 MATTAPOISETT, MA 02739
60-29 ^{NS}	FISH ISLAND	FISH ISLAND PROPERTIES LLC, 4 FISH ISLAND NEW BEDFORD, MA 02740
60-30 ^{NS}	FISH ISLAND	FISH ISLAND PROPERTIES LLC, 4 FISH ISLAND NEW BEDFORD, MA 02740
60-1 ^{NS}	FISH ISLAND	BRIDGE REAL ESTATE INVESTORS LLC, C/O HALLORAN, LUKOFF & SMITH 432 COUNTY STREET NEW BEDFORD, MA 02740
53-116	248 ^R MACARTHUR DR	155 FRONT STREET REALTY CORP, 248 R MACARTHUR DRIVE NEW BEDFORD, MA 02740



0 140 280 560 840 1,120 Feet

New Bedford – Fish Island Nominee Trust

30 Echo Road

Mashpee, MA 02649

December 5, 2019

City of New Bedford

Conservation Commission

133 Williams Street

New Bedford, MA 02740

Ref: 7 Fish Island

Map 60 – Lot 4

Dear Commissioners,

I am the Owner of the above referenced property, 7 Fish Island. AGM Marine Contractors, Inc., is the applicant on a Request for Determination of Applicability (RDA) for the installation of four (4) each 8' x 20' Conex containers on this property. The proposed location is on the Northeast corner in the location of the building that was most recently demolished and removed from the site. The containers will be used for storage, electrical equipment and office space.

As the Owner of the property I hereby authorize AGM Marine Contractors, Inc. to submit the RDA and place the containers. If you require anything further in order to process their RDA please do not hesitate to contact me.

Respectfully submitted,



John Mikutowicz, Trustee

New Bedford – Fish Island Nominee Trust

508-477-8801

QUITCLAIM DEED

I, WILLIAM J. THIBEAULT, as Trustee of Fish Island Realty Trust, under declaration of trust dated January 4, 1995, and recorded in the Bristol South Registry of Deeds, Book 3434, Page 41, for Five Hundred Thousand (\$500,000.00) Dollars consideration paid, hereby grant, with Quitclaim covenants, to VICTOR PETKAUSKOS and JOHN MIKUTOWICZ, as Trustees of New Bedford - Fish Island Nominee Trust, under declaration of trust dated October 15, 1997, and recorded prior hereto, that certain parcel of land with all the buildings and structures now or hereafter standing or placed thereon, situated in New Bedford, in the County of Bristol, and of Commonwealth of Massachusetts, being bounded and described as follows:

Beginning at a punch mark in the southerly line of New Bedford Fairhaven Bridge (U.S. Route 6);
thence NORTH 65 degrees 19' 15" EAST in said southerly line of New Bedford Fairhaven Bridge (U.S. Route 6), thirty-two and 16/100 (32.16) feet to land of Edward O. Sanchez;
thence SOUTH 24 degrees 40' 45" EAST in the line of last-named land, twenty and 00/100 (20.00) feet;
thence SOUTH 75 degrees 55' 57" EAST still in line of last-named land, one hundred twenty-three and 12/100 (123.12) feet;
thence NORTH 24 degrees 49' 33" EAST still in line of last-named land, eight and 35/100 (8.35) feet;

50307.1/009210-00002

Grantees Address:
c/o A G M Marine Contractors Inc.
30 Echo Rd.
Mastpee, Ma 02649

Property Address:
Loc 1, Fish Island, U.S. Route 6
New Bedford, Massachusetts

thence SOUTH 68 degrees 57' 23" EAST partly in line of land-named land, one hundred seven and 22/100 (107.22) feet to the Harbor line;

thence SOUTH 29 degrees 35' 28" WEST by said Harbor line, four hundred sixty-three and 08/100 (463.08) feet;

thence NORTH 73 degrees 24' 32" WEST by said Harbor line, two hundred eighty and 00/100 (280.00) feet;

thence NORTH 19 degrees 39' 59" WEST by said Harbor line, one hundred thirty-one and 22/100 (131.22) feet;

thence NORTH 02 degrees 55' 13" WEST by said Harbor line, fifty-one and 76/100 (51.76) feet;

thence NORTH 76 degrees 47' 10" EAST, one hundred sixty-five and 76/100 (165.76) feet;

thence NORTH 65 degrees 19' 15" EAST, one hundred thirty-eight and 27/100 (138.27) feet;

thence NORTH 13 degrees, 51' 15" EAST, seventy-four and 66/100 (74.66) feet; and

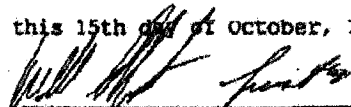
thence NORTH 24 degrees 48' 45" WEST, forty-five and 60/100 (45.60) feet to the said southerly line of New Bedford Fairhaven Bridge (U.S. Route 6) and the point of beginning. Containing land area of one and 60/100 (1.60) acres, more or less, and one and 5/10 (1.5) acres, more or less, between the land and the Harbor line.

Together with any and all other riparian rights and easement rights, if any.

For Grantor's title, reference may be had to a Foreclosure
Deed and Affidavit, dated June 12, 1995, and recorded in said
Deeds, Book 3531, Page 16.

Massachusetts deed excise stamps in the amount of \$2,280.00
have been affixed hereto prior to the delivery hereof.

Witness my hand and seal this 15th day of October, 1997.



William J. Thibeault, as Trustee
of Fish Island Realty Trust,
as aforesaid, but not individually

COMMONWEALTH OF MASSACHUSETTS

Suffolk, ss.

October 15, 1997

Then personally appeared the above-named William J.
Thibeault who acknowledged the foregoing to be his free act and
deed as Trustee as aforesaid, before me


Notary Public
My Commission Expires:

WILLIAM O. RIZZO, Notary Public
My Commission Expires Feb. 21, 2000

DEEDS REC 07
BRISTOL SOUTH
10/16/97

TAX 2280.00
CHCK 2280.00

8717A128 14:15
EXCISE TAX

ELEVATION CERTIFICATE

Important: Follow the instructions on pages 1–9.

Copy all pages of this Elevation Certificate and all attachments for (1) community official, (2) insurance agent/company, and (3) building owner.

SECTION A – PROPERTY INFORMATION					FOR INSURANCE COMPANY USE	
A1. Building Owner's Name AGM Marine Contractor's, Inc.					Policy Number:	
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 7 Fish Island, South Side					Company NAIC Number:	
City New Bedford		State MA		ZIP Code 02740		
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) Map 60, Lot 4						
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) <u>Electrical service, equipment storage and offices</u>						
A5. Latitude/Longitude: Lat. <u>041d 38' 18.02"</u> Long. <u>070d 55' 08.82"</u> Horizontal Datum: <input type="checkbox"/> NAD 1927 <input checked="" type="checkbox"/> NAD 1983						
A6. Attach at least 2 photographs of the building if the Certificate is being used to obtain flood insurance.						
A7. Building Diagram Number _____						
A8. For a building with a crawlspace or enclosure(s):						
a) Square footage of crawlspace or enclosure(s) _____ sq ft						
b) Number of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot above adjacent grade _____						
c) Total net area of flood openings in A8.b _____ sq in						
d) Engineered flood openings? <input type="checkbox"/> Yes <input type="checkbox"/> No						
A9. For a building with an attached garage:						
a) Square footage of attached garage _____ sq ft						
b) Number of permanent flood openings in the attached garage within 1.0 foot above adjacent grade _____						
c) Total net area of flood openings in A9.b _____ sq in						
d) Engineered flood openings? <input type="checkbox"/> Yes <input type="checkbox"/> No						
SECTION B – FLOOD INSURANCE RATE MAP (FIRM) INFORMATION						
B1. NFIP Community Name & Community Number City of New Bedford, 255216			B2. County Name Bristol		B3. State Massachusetts <input checked="" type="checkbox"/>	
B4. Map/Panel Number 25005C0393	B5. Suffix G	B6. FIRM Index Date 07/07/2009	B7. FIRM Panel Effective/ Revised Date 07/16/2014	B8. Flood Zone(s) AE	B9. Base Flood Elevation(s) (Zone AO, use Base Flood Depth) EL 6	
B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9: <input type="checkbox"/> FIS Profile <input checked="" type="checkbox"/> FIRM <input type="checkbox"/> Community Determined <input type="checkbox"/> Other/Source: _____						
B11. Indicate elevation datum used for BFE in Item B9: <input type="checkbox"/> NGVD 1929 <input checked="" type="checkbox"/> NAVD 1988 <input type="checkbox"/> Other/Source: _____						
B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Designation Date: _____ <input type="checkbox"/> CBRS <input type="checkbox"/> OPA						

ELEVATION CERTIFICATE

OMB No. 1660-0008
Expiration Date: November 30, 2018

IMPORTANT: In these spaces, copy the corresponding information from Section A.			FOR INSURANCE COMPANY USE
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 7 Fish Island, South Side			Policy Number:
City New Bedford	State MA	ZIP Code <input checked="" type="checkbox"/> 02740	Company NAIC Number

SECTION C – BUILDING ELEVATION INFORMATION (SURVEY REQUIRED)

C1. Building elevations are based on: ☐ Construction Drawings* ☐ Building Under Construction* ☒ Finished Construction

*A new Elevation Certificate will be required when construction of the building is complete.

C2. Elevations – Zones A1–A30, AE, AH, A (with BFE), VE, V1–V30, V (with BFE), AR, AR/A, AR/AE, AR/A1–A30, AR/AH, AR/AO. Complete Items C2.a–h below according to the building diagram specified in Item A7. In Puerto Rico only, enter meters.

Benchmark Utilized: MassDOT ID 9882, New Bedford Sta 7477 Vertical Datum: NAVD88

Indicate elevation datum used for the elevations in items a) through h) below.

☐ NGVD 1929 ☒ NAVD 1988 ☐ Other/Source: _____

Datum used for building elevations must be the same as that used for the BFE.



Check the measurement used.

a) Top of bottom floor (including basement, crawlspace, or enclosure floor)	<u>9.23</u>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters
b) Top of the next higher floor	<u>17.24</u>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters
c) Bottom of the lowest horizontal structural member (V Zones only)	_____	<input type="checkbox"/> feet <input type="checkbox"/> meters
d) Attached garage (top of slab)	_____	<input type="checkbox"/> feet <input type="checkbox"/> meters
e) Lowest elevation of machinery or equipment servicing the building (Describe type of equipment and location in Comments)	<u>9.56</u>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters
f) Lowest adjacent (finished) grade next to building (LAG)	<u>8.52</u>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters
g) Highest adjacent (finished) grade next to building (HAG)	<u>8.62</u>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters
h) Lowest adjacent grade at lowest elevation of deck or stairs, including structural support	<u>8.55</u>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters

SECTION D – SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION

This certification is to be signed and sealed by a land surveyor, engineer, or architect authorized by law to certify elevation information. I certify that the information on this Certificate represents my best efforts to interpret the data available. I understand that any false statement may be punishable by fine or imprisonment under 18 U.S. Code, Section 1001.

Were latitude and longitude in Section A provided by a licensed land surveyor? ☐ Yes ☒ No ☐ Check here if attachments.

Certifier's Name Richard G. FitzGerald		License Number P.E. 35167	
Title Project Engineer			
Company Name AGM Marine Contractors, Inc.			
Address 30 Echo Road			
City Mashpee	State MA	ZIP Code <input checked="" type="checkbox"/> 02649	
Signature 	Date 11/21/19	Telephone 508-477-8801	Ext.

Copy all pages of this Elevation Certificate and all attachments for (1) community official, (2) insurance agent/company, and (3) building owner.

Comments (including type of equipment and location, per C2(e), if applicable)

Equipment with the lowest elevation is an electrical transformer located in the northern bottom container.

ELEVATION CERTIFICATE

OMB No. 1660-0008
Expiration Date: November 30, 2018

IMPORTANT: In these spaces, copy the corresponding information from Section A.			FOR INSURANCE COMPANY USE
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 7 Fish Island, South Side			Policy Number:
City New Bedford	State MA	ZIP Code <input checked="" type="checkbox"/> 02740	Company NAIC Number

SECTION E – BUILDING ELEVATION INFORMATION (SURVEY NOT REQUIRED) FOR ZONE AO AND ZONE A (WITHOUT BFE)

For Zones AO and A (without BFE), complete Items E1–E5. If the Certificate is intended to support a LOMA or LOMR-F request, complete Sections A, B, and C. For Items E1–E4, use natural grade, if available. Check the measurement used. In Puerto Rico only, enter meters.

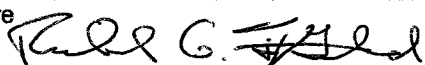
- E1. Provide elevation information for the following and check the appropriate boxes to show whether the elevation is above or below the highest adjacent grade (HAG) and the lowest adjacent grade (LAG).
- a) Top of bottom floor (including basement, crawlspace, or enclosure) is _____ ☐ feet ☐ meters ☐ above or ☐ below the HAG.
- b) Top of bottom floor (including basement, crawlspace, or enclosure) is _____ ☐ feet ☐ meters ☐ above or ☐ below the LAG.
- E2. For Building Diagrams 6–9 with permanent flood openings provided in Section A Items 8 and/or 9 (see pages 1–2 of Instructions), the next higher floor (elevation C2.b in the diagrams) of the building is _____ ☐ feet ☐ meters ☐ above or ☐ below the HAG.
- E3. Attached garage (top of slab) is _____ ☐ feet ☐ meters ☐ above or ☐ below the HAG.
- E4. Top of platform of machinery and/or equipment servicing the building is _____ ☐ feet ☐ meters ☐ above or ☐ below the HAG.
- E5. Zone AO only: If no flood depth number is available, is the top of the bottom floor elevated in accordance with the community's floodplain management ordinance? ☐ Yes ☐ No ☐ Unknown. The local official must certify this information in Section G.

SECTION F – PROPERTY OWNER (OR OWNER'S REPRESENTATIVE) CERTIFICATION

The property owner or owner's authorized representative who completes Sections A, B, and E for Zone A (without a FEMA-issued or community-issued BFE) or Zone AO must sign here. The statements in Sections A, B, and E are correct to the best of my knowledge.

Property Owner or Owner's Authorized Representative's Name

Richard G. FitzGerald

Address 30 Echo Road	City Mashpee	State MA	ZIP Code <input checked="" type="checkbox"/> 02649
Signature 	Date 11/21/19	Telephone 508-477-8801	

Comments

☐ Check here if attachments.

ELEVATION CERTIFICATE

OMB No. 1660-0008
Expiration Date: November 30, 2018

IMPORTANT: In these spaces, copy the corresponding information from Section A.			FOR INSURANCE COMPANY USE
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 7 Fish Island, South Side			Policy Number:
City New Bedford	State MA	ZIP Code <input checked="" type="checkbox"/> 02740	Company NAIC Number

SECTION G – COMMUNITY INFORMATION (OPTIONAL)

The local official who is authorized by law or ordinance to administer the community's floodplain management ordinance can complete Sections A, B, C (or E), and G of this Elevation Certificate. Complete the applicable item(s) and sign below. Check the measurement used in Items G8–G10. In Puerto Rico only, enter meters.

- G1. ☐ The information in Section C was taken from other documentation that has been signed and sealed by a licensed surveyor, engineer, or architect who is authorized by law to certify elevation information. (Indicate the source and date of the elevation data in the Comments area below.)
- G2. ☐ A community official completed Section E for a building located in Zone A (without a FEMA-issued or community-issued BFE) or Zone AO.
- G3. ☐ The following information (Items G4–G10) is provided for community floodplain management purposes.

G4. Permit Number	G5. Date Permit Issued	G6. Date Certificate of Compliance/Occupancy Issued
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G7. This permit has been issued for: ☐ New Construction ☐ Substantial Improvement

G8. Elevation of as-built lowest floor (including basement) of the building: _____ ☐ feet ☐ meters Datum _____

G9. BFE or (in Zone AO) depth of flooding at the building site: _____ ☐ feet ☐ meters Datum _____

G10. Community's design flood elevation: _____ ☐ feet ☐ meters Datum _____

Local Official's Name	Title
Community Name	Telephone
Signature	Date

Comments (including type of equipment and location, per C2(e), if applicable)

☐ Check here if attachments.

BUILDING PHOTOGRAPHS

See Instructions for Item A6.

OMB No. 1660-0008

Expiration Date: November 30, 2018

ELEVATION CERTIFICATE

IMPORTANT: In these spaces, copy the corresponding information from Section A.			FOR INSURANCE COMPANY USE	
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 7 Fish Island, South Side			Policy Number:	
City New Bedford	State MA	ZIP Code 02740	Company NAIC Number	

If using the Elevation Certificate to obtain NFIP flood insurance, affix at least 2 building photographs below according to the instructions for Item A6. Identify all photographs with date taken; "Front View" and "Rear View"; and, if required, "Right Side View" and "Left Side View." When applicable, photographs must show the foundation with representative examples of the flood openings or vents, as indicated in Section A8. If submitting more photographs than will fit on this page, use the Continuation Page.

Photo One

Photo One

Photo One Caption

Clear Photo One

Photo Two

Photo Two

Photo Two Caption

Clear Photo Two

IMPORTANT: In these spaces, copy the corresponding information from Section A.			FOR INSURANCE COMPANY USE	
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 7 Fish Island, South Side			Policy Number:	
City New Bedford	State MA	ZIP Code <div>▼</div> 02740	Company NAIC Number	

If submitting more photographs than will fit on the preceding page, affix the additional photographs below. Identify all photographs with: date taken; "Front View" and "Rear View"; and, if required, "Right Side View" and "Left Side View." When applicable, photographs must show the foundation with representative examples of the flood openings or vents, as indicated in Section A8.

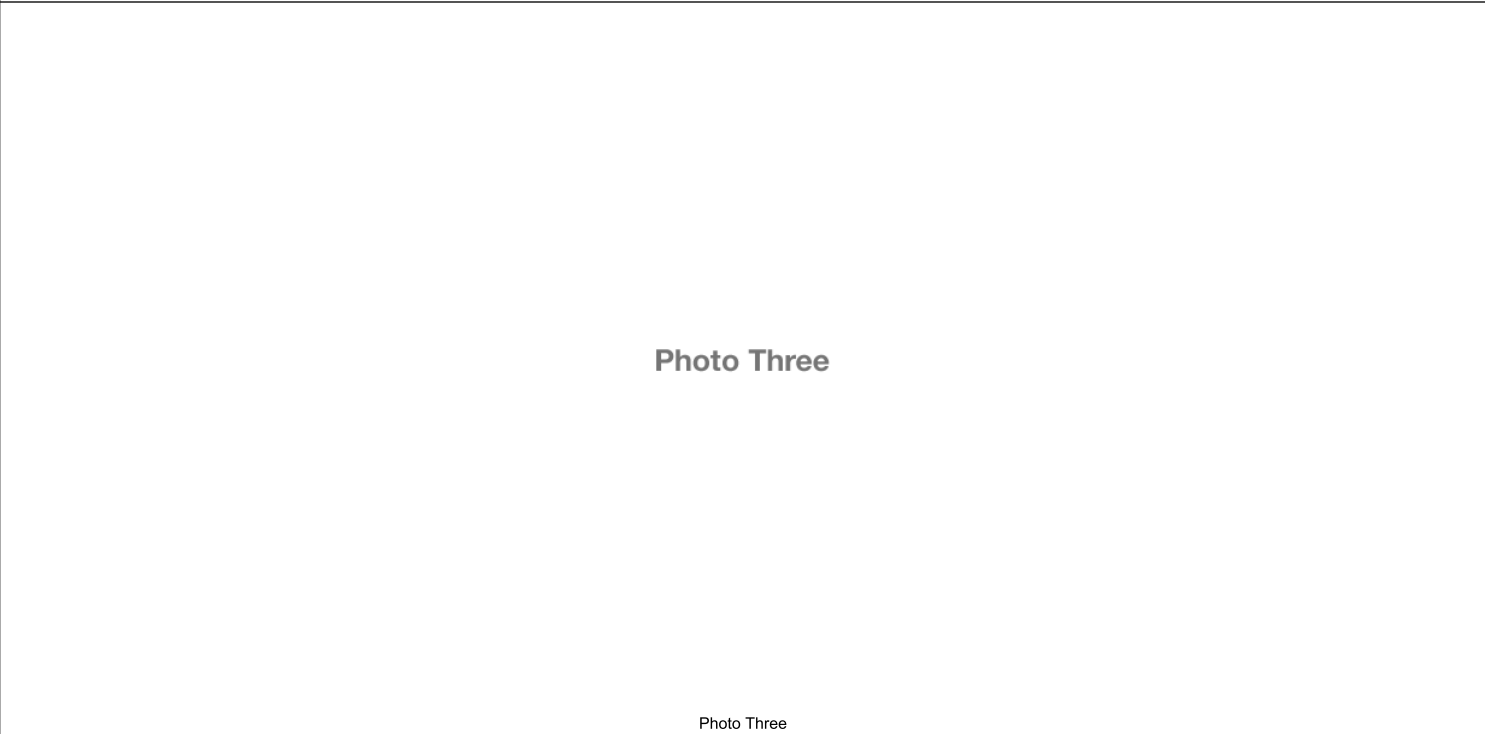


Photo Three Caption

Clear Photo Three



Photo Four Caption

Clear Photo Four

Fish Island, New Bedford

Proposed Conex Container Location

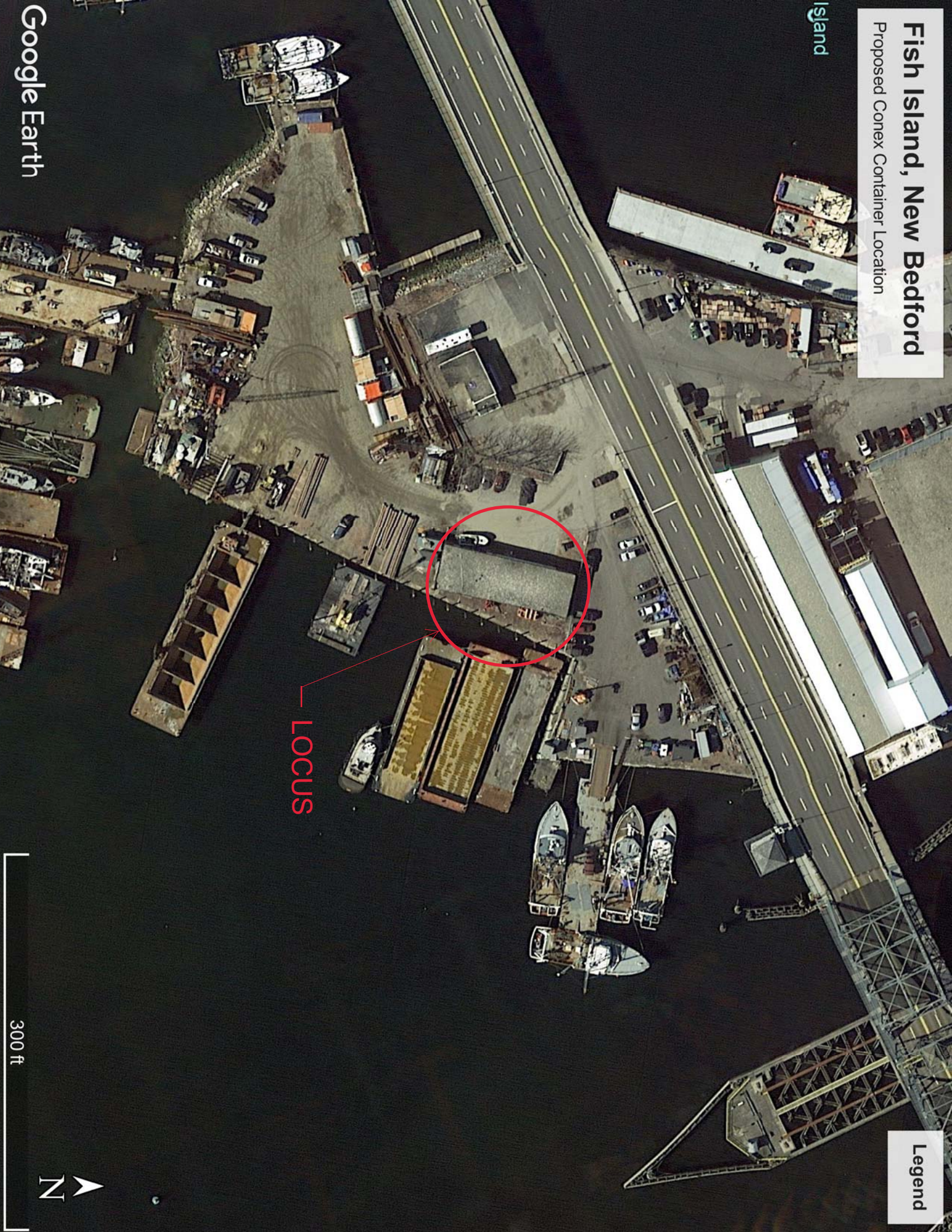
Island

Legend

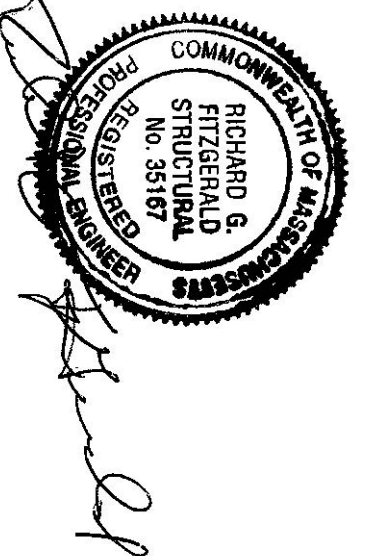
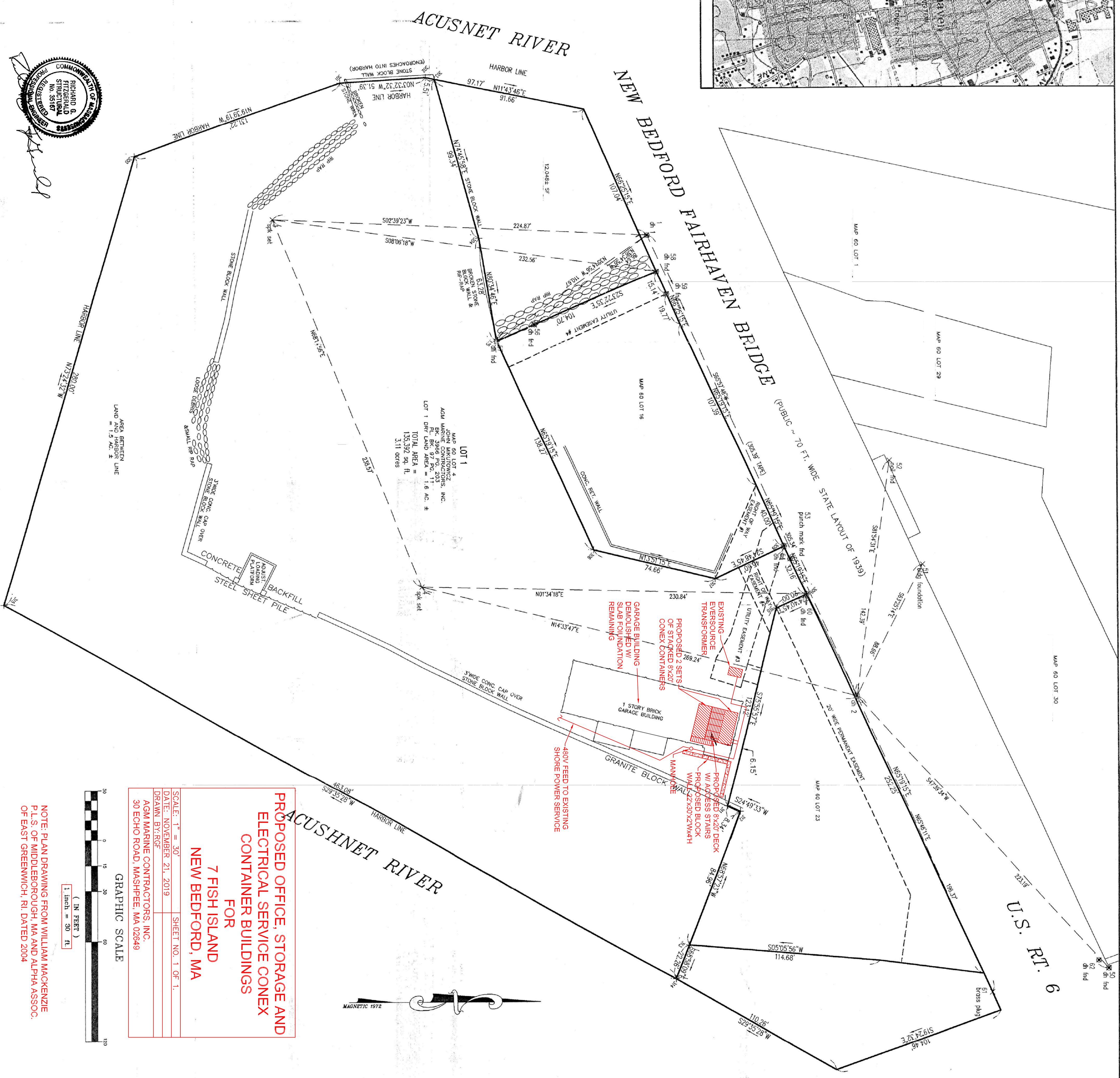
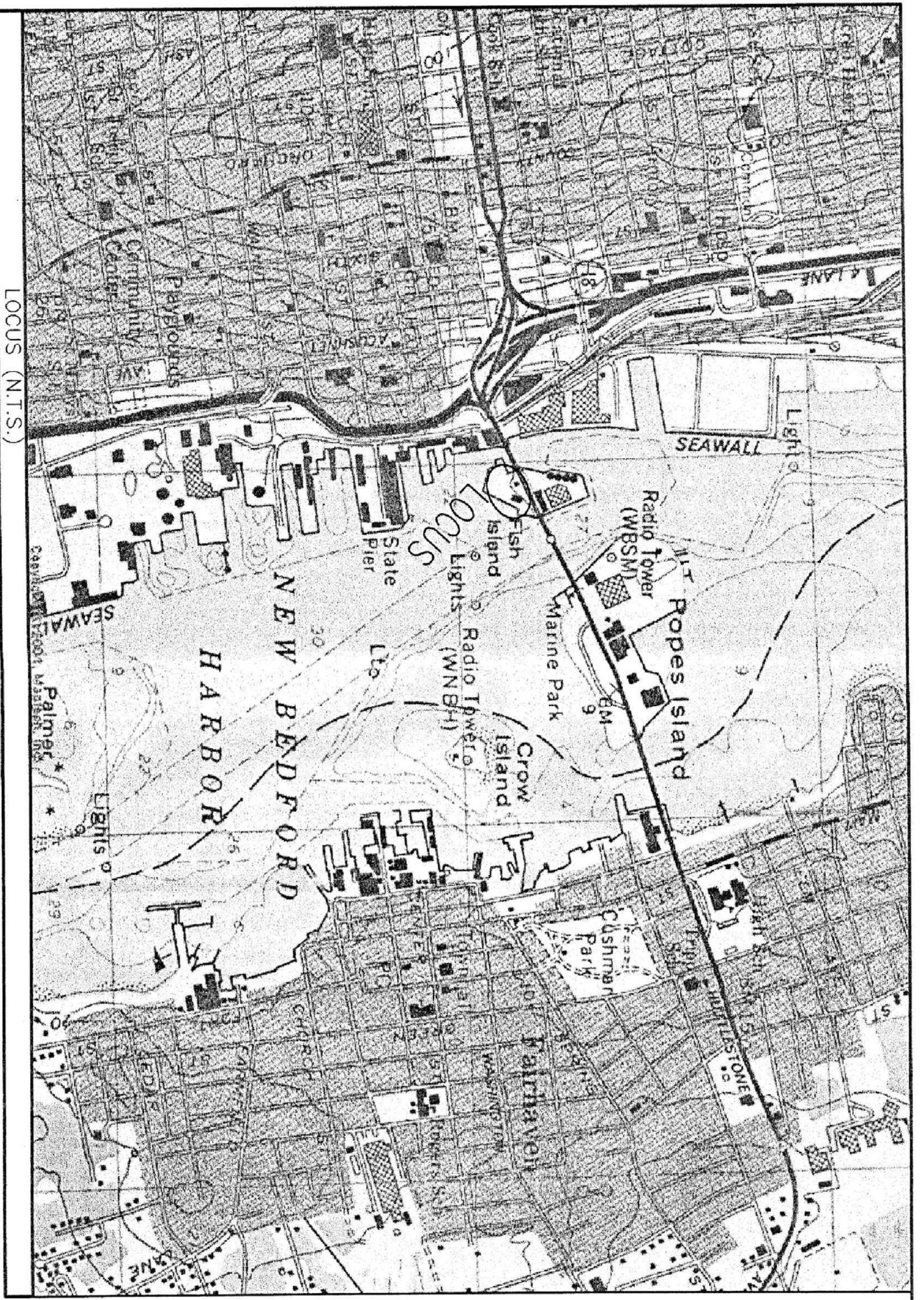
Locus

Google Earth

300 ft







PLAN OF LAND
IN NEW BEDFORD, MASSACHUSETTS

FISH ISLAND