

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:

Thomas & Maria L. Ferreira

[thomas.ferreira@comcast.net](mailto:thomas.ferreira@comcast.net)

34 Seaview Terrace

New Bedford

Ma

02744

Zip Code

508-997-6085

N/A

Thomas Ferreira

Firm \_\_\_\_\_

Contact Name \_\_\_\_\_

E-Mail Address \_\_\_\_\_

Mailing Address \_\_\_\_\_

City/Town \_\_\_\_\_

State \_\_\_\_\_

Zip Code \_\_\_\_\_

Phone Number \_\_\_\_\_

Fax Number (if applicable) \_\_\_\_\_

**B. Determinations**

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

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 \_\_\_\_\_

**Massachusetts Department of Environmental Protection**  
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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):

34 Seaview Terrace

New Bedford

Plot Number 6

Lot Number 29

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

Backyard of residence at 34 Seaview Terrace, New Bedford, Massachusetts

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

Title: Plan of patio

Date: 7/5/2021

Title: Drainage

Date: 7/23/21

Title \_\_\_\_\_

Date \_\_\_\_\_

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

Patio install using pavers

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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).

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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

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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.)

**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:

Thomas & Maria L. Ferreira

34 Seaview Terrace

New Bedford

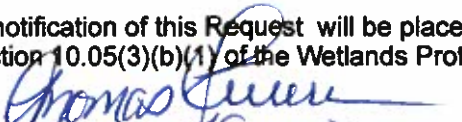

Ma

02744

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.

Signature of Applicant

Date

8/3/2021  
8/3/2021

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Signature of Representative (if any) \_\_\_\_\_

Date \_\_\_\_\_



House

14'

Existing Bulkhead

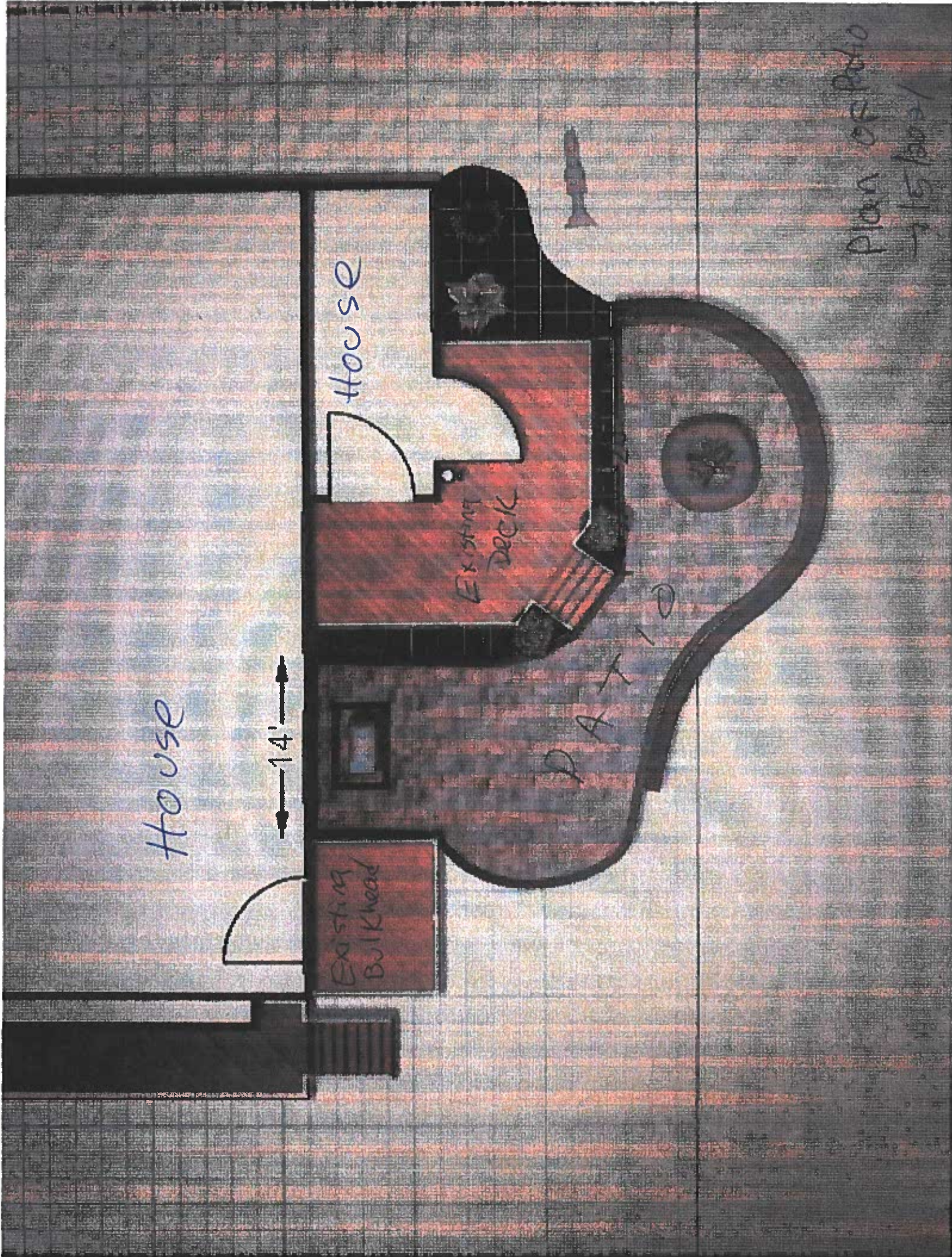
House

Existing Deck

Patio

Plan of Patio

7/15/2001





Handwritten text, possibly a date or note, written vertically on the right edge of the photo.





ADRIANO MIMOSO and MARIA MIMOSO, husband and wife  
of New Bedford, Bristol County, Massachusetts,

being unmarried, for consideration paid, and in full consideration of One Hundred Thirty Thousand Dollars

grant to THOMAS FERREIRA and MARIA FERREIRA, husband and wife, as tenants by the \*  
entirety and not as tenants in common nor as joint tenants  
of 160 David Street, New Bedford, Massachusetts with quitclaim covenants

the land in said New Bedford, bounded and described as follows:

(Description and encumbrances, if any)

Beginning at a point in the easterly line of Sea View Terrace distant northerly  
therein one hundred twenty-five and 35/100 (125.35) feet from an angle point, said  
point being in the southerly line of Freedom Boulevard extended:

thence N 15° 44' 51" E in said easterly line of Sea View Terrace a distance of  
ninety-five (95) feet to a point;

thence S 74° 15' 09" E a distance of one hundred (100) feet to a point;

thence S 15° 44' 51" W a distance of ninety-five (95) feet to a point;

thence N 74° 15' 09" W a distance of one hundred (100) feet to the point of  
beginning, containing 9,500 square feet.

being Lot 29 on a plan of land drawn for the City of New Bedford, known as  
"Corrective Plan of Subdivision of Poor Farm Land in New Bedford, Mass." dated  
December 30, 1970.

This onveyance is subject to restrictions of record in so far as they may be in  
force and applicable.

Being the same premises conveyed to these grantors by deed of City of New Bedford  
dated September 5, 1974 and recorded in the Bristol County South District Registry of  
Deeds Book 1690, Page 299.

DEEDS REG 07  
BRISTOL SOUTH  
12/28/89  
TAX 592.80  
CHECK 592.80  
\$989A128 16:13  
EXCISE TAX

Witness our hands and seals this 28<sup>th</sup> day of December, 1989

Adriano Mimoso

Maria Mimoso

The Commonwealth of Massachusetts

Bristol ss.

December 28 1989

Then personally appeared the above named ADRIANO MIMOSO and MARIA MIMOSO

and acknowledged the foregoing instrument to be their free act and deed before me

Rec'd & Recorded Dec 28 1989 W. M. G. Kenney Notary Public - Justice of the Peace  
at 4 hrs. & 13 min P. M. My commission expires Nov. 21 1991

Attest John E. Jones Registrar  
(\*Individual - Joint Tenants - Tenants in Common.)

CHAPTER 183 SEC. 6 AS AMENDED BY CHAPTER 497 OF 1969

Every deed presented for record shall contain or have endorsed upon it the full name, residence and post office address of the grantee  
and a recital of the amount of the full consideration thereof in dollars or the nature of the other consideration therefor, if not delivered  
for a specific monetary sum. The full consideration shall mean the total price for the conveyance without deduction for any liens or  
encumbrances assumed by the grantee or remaining thereon. All such endorsements and recitals shall be recorded as part of the deed.  
Failure to comply with this section shall not affect the validity of any deed. No register of deeds shall accept a deed for recording unless  
it is in compliance with the requirements of this section.



COMPARED

26251

MASSACHUSETTS

Shuttle Street at

Quintilian Street

(INDIVIDUAL)

TO

RECEIVED  
1989 DEC 28 PM 4:13  
SOUTHERN DISTRICT

Dec 26, 1989  
at 4 o'clock and 13 minutes  
Received and entered with the authority of the  
Book of the Court of Docks  
Ancy  
Page 184  
Jones  
REGISTER  
Register

FROM THE OFFICE OF

RETURN TO →

HOBBS & WARREN, INC.

FOREIGNERS STANDARDS LEGAL FORDS

BOSTON - MASS.

FORM 861

REVISED CHAPTER 475(1983)-727-1180

(Please print or type)



## 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).

SUBJECT PROPERTY	
MAP #	6
LOT(S)#	29
ADDRESS: 34 Seaview Terrace New Bedford MA	
OWNER INFORMATION	
NAME: Thomas Maria L. Ferreira	
MAILING ADDRESS: 34 Seaview Terrace New Bedford, MA 02744	
APPLICANT/CONTACT PERSON INFORMATION	
NAME (IF DIFFERENT):	
MAILING ADDRESS (IF DIFFERENT):	
TELEPHONE #	508-997-6085
EMAIL ADDRESS:	THOMAS.FERREIRA@comcast.net
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

08/03/2021

Date

Amount Due

\$7.00

Date Paid

08/03/2021

Confirmation Number

In Office JA



**Schedule of Departmental Payments to Treasurer**  
**Single Charge Code**

<b>Charge Code</b>	<b>ASSFEE</b>
--------------------	---------------

7.00

~~PRINCIPAL CLERK~~

**Schedule of Departmental Payments to Treasurer**  
**~~Single Charge Code~~**

**Charge Code**By

August 3, 2021  
Dear Applicant,

Please find below the List of Abutters within 100 feet of the property known as 34 Seaview Terrace (Map: 6, Lot: 29). 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.

Parcel	Location	Owner and Mailing Address
6-27	50 SEAVIEW TER	MESTRE AMADEU A, MESTRE MARIA M 50 SEAVIEW TERRACE NEW BEDFORD, MA 02744-1927
6-28	42 SEAVIEW TER	SOARES JOHN M, 42 SEAVIEW TERRACE NEW BEDFORD, MA 02744
6-25	1169 E RODNEY FRENCH BLVD	ARALIM-SURIEL LLC, 1169 E RODNEY FRENCH BLVD NEW BEDFORD, MA 02744
6-31	18 SEAVIEW TER	RAMOS JEFFREY J, 18 SEAVIEW TERRACE NEW BEDFORD, MA 02744
6-39	35 SEAVIEW TER	SANTOS JAIME, SANTOS ISABEL 35 SEAVIEW TERRACE NEW BEDFORD, MA 02744
6-24	1157 E RODNEY FRENCH BLVD	ESTUDANTE ARMANDO M "TRUSTEE", ESTUDANTE LUCILIA F "TRUSTEE" 1157 EAST RODNEY FRENCH BLVD NEW BEDFORD, MA 02744
6-30	24 SEAVIEW TER	FERREIRA MARIA A, 24 SEAVIEW TERRACE NEW BEDFORD, MA 02744
6-38	25 SEAVIEW TER	WILLIAMS MARYANN B, 25 SEAVIEW TERRACE NEW BEDFORD, MA 02744
6-23	1147 E RODNEY FRENCH BLVD	KERTZMAN HARVEY, KERTZMAN NOREEN 1147 E RODNEY FRENCH BLVD NEW BEDFORD, MA 02744
6-29	34 SEAVIEW TER	<del>FERREIRA THOMAS, FERREIRA MARIA L 34 SEAVIEW TERRACE NEW BEDFORD, MA 02744</del>
6-40	45 Seaview Ter	Nogueira Antonio DaCosta Manuel 45 Seaview Terrace New Bedford, Ma 02744
6-21	3 NINA ST	VINAGRE CARLOS DASILVA, VINAGRE MARIA HELENA 3 NINA ST NEW BEDFORD, MA 02744



First-Class Mail® 1 \$0.55  
Letter

New Bedford, MA 02744  
Weight: 0 lb 0.30 oz  
Estimated Delivery Date  
Sat 08/07/2021

Certified Mail® \$3.60  
Tracking #:

70203160000142599115

Total \$4.15

First-Class Mail® 1 \$0.55  
Letter

New Bedford, MA 02744  
Weight: 0 lb 0.30 oz  
Estimated Delivery Date  
Sat 08/07/2021

Certified Mail® \$3.60  
Tracking #:

70203160000142599122

Total \$4.15

First-Class Mail® 1 \$0.55  
Letter

New Bedford, MA 02744  
Weight: 0 lb 0.30 oz  
Estimated Delivery Date  
Sat 08/07/2021

Certified Mail® \$3.60  
Tracking #:

70203160000142599139

Total \$4.15

First-Class Mail® 1 \$0.55  
Letter

New Bedford, MA 02744  
Weight: 0 lb 0.30 oz  
Estimated Delivery Date  
Sat 08/07/2021

Certified Mail® \$3.60  
Tracking #:

70203160000142599146

Total \$4.15

First-Class Mail® 1 \$0.55  
Letter

New Bedford, MA 02744  
Weight: 0 lb 0.30 oz  
Estimated Delivery Date  
Sat 08/07/2021

Certified Mail® \$3.60  
Tracking #:

70203160000142599153

Total \$4.15

First-Class Mail® 1 \$0.55  
Letter

New Bedford, MA 02744  
Weight: 0 lb 0.30 oz  
Estimated Delivery Date  
Sat 08/07/2021

Certified Mail® \$3.60  
Tracking #:

70203160000142599160

Total \$4.15



SOUTH DARTMOUTH  
668 DARTMOUTH ST  
SOUTH DARTMOUTH, MA 02748-3099  
(800)275-8777

08/04/2021

11:40 AM

Product	Qty	Unit Price	Price
---------	-----	------------	-------

First-Class Mail®	1		\$0.55
Letter			

New Bedford, MA 02744  
Weight: 0 lb 0.50 oz  
Estimated Delivery Date  
Sat 08/07/2021

Certified Mail® \$3.60  
Tracking #:

70203160000142599078

Total \$4.15

First-Class Mail®	1		\$0.55
Letter			

New Bedford, MA 02744  
Weight: 0 lb 0.30 oz  
Estimated Delivery Date  
Sat 08/07/2021

Certified Mail® \$3.60  
Tracking #:

70203160000142599085

Total \$4.15

First-Class Mail®	1		\$0.55
Letter			

New Bedford, MA 02744  
Weight: 0 lb 0.30 oz  
Estimated Delivery Date  
Sat 08/07/2021

Certified Mail® \$3.60  
Tracking #:

70203160000142599092

Total \$4.15

First-Class Mail®	1		\$0.55
Letter			

New Bedford, MA 02744  
Weight: 0 lb 0.30 oz  
Estimated Delivery Date  
Sat 08/07/2021

Certified Mail® \$3.60  
Tracking #:

70203160000142599108

Total \$4.15

First-Class Mail® 1 \$0.55  
Letter  
New Bedford, MA 02744  
Weight: 0 lb 0.30 oz  
Estimated Delivery Date  
Sat 08/07/2021  
Certified Mail® \$3.60  
Tracking #: 70203160000142599177  
Total \$4.15

Grand Total: \$45.65

Debit Card Remitted \$45.65  
Card Name: VISA  
Account #: XXXXXXXXXXXX6165  
Approval #: 331178  
Transaction #: 153  
Receipt #: 021929  
Debit Card Purchase: \$45.65  
AID: A0000000980840 Chip  
AL: US DEBIT  
PIN: Verified US DEBIT

\*\*\*\*\*  
USPS is experiencing unprecedented volume  
increases and limited employee  
availability due to the impacts of  
COVID-19. We appreciate your patience.  
\*\*\*\*\*

Text your tracking number to 28777 (2USPS)  
to get the latest status. Standard Message  
and Data rates may apply. You may also  
visit [www.usps.com](http://www.usps.com) USPS Tracking or call  
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or call 1-800-410-7420.

UFN: 245038-0748  
Receipt #: 840-50280170-2-4591991-2  
Clerk: 22



7020 3160 0001 4259 9149

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For delivery information, visit our website at [www.usps.com](http://www.usps.com)®.

New Bedford, MA 02744

Certified Mail Fee \$3.60

Extra Services & Fees (check box, add fee as appropriate)

<input type="checkbox"/> Return Receipt (hardcopy)	\$0.00
<input type="checkbox"/> Return Receipt (electronic)	\$0.00
<input type="checkbox"/> Certified Mail Restricted Delivery	\$0.00
<input type="checkbox"/> Adult Signature Required	\$0.00
<input type="checkbox"/> Adult Signature Restricted Delivery	\$0.00

Postage \$0.55

Total Postage and Fees \$4.15

Sent To A-S LLC

Street and Apt. No., or PO Box No. 119 E Rod Fr Bldg

City, State, ZIP+4® NB

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

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Extra Services & Fees (check box, add fee as appropriate)

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<input type="checkbox"/> Return Receipt (electronic)	\$0.00
<input type="checkbox"/> Certified Mail Restricted Delivery	\$0.00
<input type="checkbox"/> Adult Signature Required	\$0.00
<input type="checkbox"/> Adult Signature Restricted Delivery	\$0.00

Postage \$0.55

Total Postage and Fees \$4.15

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Street and Apt. No., or PO Box No. 18 Seaview

City, State, ZIP+4® NB

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<input type="checkbox"/> Return Receipt (hardcopy)	\$0.00
<input type="checkbox"/> Return Receipt (electronic)	\$0.00
<input type="checkbox"/> Certified Mail Restricted Delivery	\$0.00
<input type="checkbox"/> Adult Signature Required	\$0.00
<input type="checkbox"/> Adult Signature Restricted Delivery	\$0.00

Postage \$0.55

Total Postage and Fees \$4.15

Sent To J Santos

Street and Apt. No., or PO Box No. 35 Seaview

City, State, ZIP+4® NB

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<input type="checkbox"/> Return Receipt (electronic)	\$0.00
<input type="checkbox"/> Certified Mail Restricted Delivery	\$0.00
<input type="checkbox"/> Adult Signature Required	\$0.00
<input type="checkbox"/> Adult Signature Restricted Delivery	\$0.00

Postage \$0.55

Total Postage and Fees \$4.15

Sent To C Vinagre

Street and Apt. No., or PO Box No. 3 N. Main

City, State, ZIP+4® NB

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<input type="checkbox"/> Return Receipt (electronic)	\$0.00
<input type="checkbox"/> Certified Mail Restricted Delivery	\$0.00
<input type="checkbox"/> Adult Signature Required	\$0.00
<input type="checkbox"/> Adult Signature Restricted Delivery	\$0.00

Postage \$0.55

Total Postage and Fees \$4.15

Sent To A Mestiere

Street and Apt. No., or PO Box No. 50 Seaview

City, State, ZIP+4® NB

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<input type="checkbox"/> Return Receipt (electronic)	\$0.00
<input type="checkbox"/> Certified Mail Restricted Delivery	\$0.00
<input type="checkbox"/> Adult Signature Required	\$0.00
<input type="checkbox"/> Adult Signature Restricted Delivery	\$0.00

Postage \$0.55

Total Postage and Fees \$4.15

Sent To J Soares

Street and Apt. No., or PO Box No. 42 Seaview

City, State, ZIP+4® NB

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

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 Extra Services & Fees (check box, add fee as appropriate)  
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☐ Return Receipt (electronic) \$0.00  
☐ Certified Mail Restricted Delivery \$0.00  
☐ Adult Signature Required \$0.00  
☐ Adult Signature Restricted Delivery \$0.00

Postage \$0.55

Total Postage and Fees \$4.15

Sent To *H. Kertész*  
 Street and Apt. No., or PO Box No.  
 City, State, ZIP+4®

PS Form 3800, April 2015 PSN 7530-02-000-9047

See Reverse for Instructions

0748  
22  
Postmark  
Here  
08/04/2021

7020 3160 0001 4259 9078

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☐ Return Receipt (electronic) \$0.00  
☐ Certified Mail Restricted Delivery \$0.00  
☐ Adult Signature Required \$0.00  
☐ Adult Signature Restricted Delivery \$0.00

Postage \$0.55

Total Postage and Fees \$4.15

Sent To *M. W. Almeida*  
 Street and Apt. No., or PO Box No.  
 City, State, ZIP+4®

PS Form 3800, April 2015 PSN 7530-02-000-9047

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0748  
22  
Postmark  
Here  
08/04/2021

7020 3160 0001 4259 9108

# U.S. Postal Service CERTIFIED MAIL® RECEIPT

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New Bedford, MA 02744

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☐ Adult Signature Required \$0.00  
☐ Adult Signature Restricted Delivery \$0.00

Postage \$0.55

Total Postage and Fees \$4.15

Sent To *A. Estudante*  
 Street and Apt. No., or PO Box No.  
 City, State, ZIP+4®

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