

Notice of Intent (NOI)

To: City of New Bedford Conservation Commission •
Department of Environmental Stewardship
And
Massachusetts Department of Environmental Protection

RE: Removal of 13 Trees & Addition of 2 Exterior Decks in 100 ft Buffer Zone
@ 1309 Sassaquin Ave. New Bedford, MA
10/06/22 Submission Date for
10/18/22 Hearing Date

WPA Form 3

One (1) original signed application 'WPA Form 3' and one (1) copy



Massachusetts Department of Environmental Protection
Bureau of Resource Protection - Wetlands

WPA Form 3 – Notice of Intent

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

Provided by MassDEP:

MassDEP File Number

Document Transaction Number

0

City/Town

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



Note:
Before completing this form consult your local Conservation Commission regarding any municipal bylaw or ordinance.

A. General Information

1. Project Location (**Note:** electronic filers will click on button to locate project site):

1309 SASSAQUIN AVE

a. Street Address

NEW BEDFORD

b. City/Town

02745

c. Zip Code

Latitude and Longitude:

41.734800

d. Latitude

-70.951020

e. Longitude

138

f. Assessors Map/Plat Number

413

g. Parcel /Lot Number

2. Applicant:

JOYCELYN ABRA

a. First Name

DEGBOR

b. Last Name

N/A

c. Organization

1309 SASSAQUIN AVENUE

d. Street Address

NEW BEDFORD

e. City/Town

MA

f. State

02745

g. Zip Code

508.995.1488

h. Phone Number

i. Fax Number

ABRA@YOURPRCOMPANY.COM

j. Email Address

3. Property owner (required if different from applicant):

Check if more than one owner

PETER

a. First Name

SILVA

b. Last Name

N/A

c. Organization

1309 SASSAQUIN AVE

d. Street Address

NEW BEDFORD

e. City/Town

MA

f. State

02745

g. Zip Code

508.951.8383

h. Phone Number

i. Fax Number

DEGBOR.SILVA2@COMCAST.NET

j. Email address

4. Representative (if any):

N/A

a. First Name

b. Last Name

c. Company

d. Street Address

e. City/Town

f. State

g. Zip Code

h. Phone Number

i. Fax Number

j. Email address

5. Total WPA Fee Paid (from NOI Wetland Fee Transmittal Form):

\$220.00

a. Total Fee Paid

\$97.50

b. State Fee Paid

\$122.50

c. City/Town Fee Paid



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A. General Information (continued)

6. General Project Description:

REMOVAL OF 13 TREES & ADDITION OF TWO DECKS IN 100FT BUFFER ZONE

7a. Project Type Checklist: (Limited Project Types see Section A. 7b.)

- 1. Single Family Home
- 2. Residential Subdivision
- 3. Commercial/Industrial
- 4. Dock/Pier
- 5. Utilities
- 6. Coastal engineering Structure
- 7. Agriculture (e.g., cranberries, forestry)
- 8. Transportation
- 9. Other

7b. Is any portion of the proposed activity eligible to be treated as a limited project (including Ecological Restoration Limited Project) subject to 310 CMR 10.24 (coastal) or 310 CMR 10.53 (inland)?

- 1. Yes No If yes, describe which limited project applies to this project. (See 310 CMR 10.24 and 10.53 for a complete list and description of limited project types)

2. Limited Project Type

If the proposed activity is eligible to be treated as an Ecological Restoration Limited Project (310 CMR10.24(8), 310 CMR 10.53(4)), complete and attach Appendix A: Ecological Restoration Limited Project Checklist and Signed Certification.

8. Property recorded at the Registry of Deeds for:

BRISTOL

a. County

11192

c. Book

b. Certificate # (if registered land)

105

d. Page Number

B. Buffer Zone & Resource Area Impacts (temporary & permanent)

- 1. Buffer Zone Only – Check if the project is located only in the Buffer Zone of a Bordering Vegetated Wetland, Inland Bank, or Coastal Resource Area.
- 2. Inland Resource Areas (see 310 CMR 10.54-10.58; if not applicable, go to Section B.3, Coastal Resource Areas).

Check all that apply below. Attach narrative and any supporting documentation describing how the project will meet all performance standards for each of the resource areas altered, including standards requiring consideration of alternative project design or location.



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B. Buffer Zone & Resource Area Impacts (temporary & permanent) (cont'd)

For all projects affecting other Resource Areas, please attach a narrative explaining how the resource area was delineated.

Resource Area	Size of Proposed Alteration	Proposed Replacement (if any)
a. <input type="checkbox"/> Bank	1. linear feet	2. linear feet
b. <input type="checkbox"/> Bordering Vegetated Wetland	1. square feet	2. square feet
c. <input type="checkbox"/> Land Under Waterbodies and Waterways	1. square feet	2. square feet
	3. cubic yards dredged	

Resource Area	Size of Proposed Alteration	Proposed Replacement (if any)
d. <input type="checkbox"/> Bordering Land Subject to Flooding	1. square feet	2. square feet
	3. cubic feet of flood storage lost	4. cubic feet replaced
e. <input type="checkbox"/> Isolated Land Subject to Flooding	1. square feet	
	2. cubic feet of flood storage lost	3. cubic feet replaced
f. <input type="checkbox"/> Riverfront Area	1. Name of Waterway (if available) - specify coastal or inland	

2. Width of Riverfront Area (check one):

- 25 ft. - Designated Densely Developed Areas only
- 100 ft. - New agricultural projects only
- 200 ft. - All other projects

3. Total area of Riverfront Area on the site of the proposed project: _____ square feet

4. Proposed alteration of the Riverfront Area:

a. total square feet _____ b. square feet within 100 ft. _____ c. square feet between 100 ft. and 200 ft. _____

5. Has an alternatives analysis been done and is it attached to this NOI? Yes No

6. Was the lot where the activity is proposed created prior to August 1, 1996? Yes No

3. Coastal Resource Areas: (See 310 CMR 10.25-10.35)

Note: for coastal riverfront areas, please complete **Section B.2.f.** above.



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B. Buffer Zone & Resource Area Impacts (temporary & permanent) (cont'd)

Check all that apply below. Attach narrative and supporting documentation describing how the project will meet all performance standards for each of the resource areas altered, including standards requiring consideration of alternative project design or location.

Online Users:
Include your document transaction number (provided on your receipt page) with all supplementary information you submit to the Department.

<u>Resource Area</u>	<u>Size of Proposed Alteration</u>	<u>Proposed Replacement (if any)</u>
a. <input type="checkbox"/> Designated Port Areas	Indicate size under Land Under the Ocean, below	
b. <input type="checkbox"/> Land Under the Ocean	_____	
	1. square feet	

	2. cubic yards dredged	
c. <input type="checkbox"/> Barrier Beach	Indicate size under Coastal Beaches and/or Coastal Dunes below	
d. <input type="checkbox"/> Coastal Beaches	_____	_____
	1. square feet	2. cubic yards beach nourishment
e. <input type="checkbox"/> Coastal Dunes	_____	_____
	1. square feet	2. cubic yards dune nourishment

	<u>Size of Proposed Alteration</u>	<u>Proposed Replacement (if any)</u>
f. <input type="checkbox"/> Coastal Banks	_____	
	1. linear feet	
g. <input type="checkbox"/> Rocky Intertidal Shores	_____	
	1. square feet	
h. <input type="checkbox"/> Salt Marshes	_____	
	1. square feet	_____
		2. sq ft restoration, rehab., creation
i. <input type="checkbox"/> Land Under Salt Ponds	_____	
	1. square feet	

	2. cubic yards dredged	
j. <input type="checkbox"/> Land Containing Shellfish	_____	
	1. square feet	
k. <input type="checkbox"/> Fish Runs	Indicate size under Coastal Banks, inland Bank, Land Under the Ocean, and/or inland Land Under Waterbodies and Waterways, above	

	1. cubic yards dredged	
l. <input type="checkbox"/> Land Subject to Coastal Storm Flowage	_____	
	1. square feet	

4. Restoration/Enhancement
If the project is for the purpose of restoring or enhancing a wetland resource area in addition to the square footage that has been entered in Section B.2.b or B.3.h above, please enter the additional amount here.

_____ a. square feet of BVW _____ b. square feet of Salt Marsh

5. Project Involves Stream Crossings

_____ a. number of new stream crossings _____ b. number of replacement stream crossings



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C. Other Applicable Standards and Requirements

- This is a proposal for an Ecological Restoration Limited Project. Skip Section C and complete Appendix A: Ecological Restoration Limited Project Checklists – Required Actions (310 CMR 10.11).

Streamlined Massachusetts Endangered Species Act/Wetlands Protection Act Review

- 1. Is any portion of the proposed project located in **Estimated Habitat of Rare Wildlife** as indicated on the most recent Estimated Habitat Map of State-Listed Rare Wetland Wildlife published by the Natural Heritage and Endangered Species Program (NHESP)? To view habitat maps, see the *Massachusetts Natural Heritage Atlas* or go to http://maps.massgis.state.ma.us/PRI_EST_HAB/viewer.htm.

- a. Yes No **If yes, include proof of mailing or hand delivery of NOI to:**

Natural Heritage and Endangered Species Program
Division of Fisheries and Wildlife
1 Rabbit Hill Road
Westborough, MA 01581

- b. Date of map _____

If yes, the project is also subject to Massachusetts Endangered Species Act (MESA) review (321 CMR 10.18). To qualify for a streamlined, 30-day, MESA/Wetlands Protection Act review, please complete Section C.1.c, and include requested materials with this Notice of Intent (NOI); OR complete Section C.2.f, if applicable. *If MESA supplemental information is not included with the NOI, by completing Section 1 of this form, the NHESP will require a separate MESA filing which may take up to 90 days to review (unless noted exceptions in Section 2 apply, see below).*

- c. Submit Supplemental Information for Endangered Species Review*

- 1. Percentage/acreage of property to be altered:

(a) within wetland Resource Area _____
percentage/acreage

(b) outside Resource Area _____
percentage/acreage

- 2. Assessor's Map or right-of-way plan of site

- 2. Project plans for entire project site, including wetland resource areas and areas outside of wetlands jurisdiction, showing existing and proposed conditions, existing and proposed tree/vegetation clearing line, and clearly demarcated limits of work **

(a) Project description (including description of impacts outside of wetland resource area & buffer zone)

(b) Photographs representative of the site

* Some projects **not** in Estimated Habitat may be located in Priority Habitat, and require NHESP review (see <https://www.mass.gov/ma-endangered-species-act-mesa-regulatory-review>).

Priority Habitat includes habitat for state-listed plants and strictly upland species not protected by the Wetlands Protection Act.

** MESA projects may not be segmented (321 CMR 10.16). The applicant must disclose full development plans even if such plans are not required as part of the Notice of Intent process.



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C. Other Applicable Standards and Requirements (cont'd)

- (c) MESA filing fee (fee information available at <https://www.mass.gov/how-to/how-to-file-for-a-mesa-project-review>).

Make check payable to "Commonwealth of Massachusetts - NHESP" and **mail to NHESP** at above address

Projects altering 10 or more acres of land, also submit:

- (d) Vegetation cover type map of site

- (e) Project plans showing Priority & Estimated Habitat boundaries

- (f) OR Check One of the Following

1. Project is exempt from MESA review.
Attach applicant letter indicating which MESA exemption applies. (See 321 CMR 10.14, <https://www.mass.gov/service-details/exemptions-from-review-for-projectsactivities-in-priority-habitat>; the NOI must still be sent to NHESP if the project is within estimated habitat pursuant to 310 CMR 10.37 and 10.59.)

2. Separate MESA review ongoing.

a. NHESP Tracking #

b. Date submitted to NHESP

3. Separate MESA review completed.

Include copy of NHESP "no Take" determination or valid Conservation & Management Permit with approved plan.

3. For coastal projects only, is any portion of the proposed project located below the mean high water line or in a fish run?

- a. Not applicable – project is in inland resource area only b. Yes No

If yes, include proof of mailing, hand delivery, or electronic delivery of NOI to either:

South Shore - Cohasset to Rhode Island border, and
the Cape & Islands:

North Shore - Hull to New Hampshire border:

Division of Marine Fisheries -
Southeast Marine Fisheries Station
Attn: Environmental Reviewer
836 South Rodney French Blvd.
New Bedford, MA 02744
Email: dmf.envreview-south@mass.gov

Division of Marine Fisheries -
North Shore Office
Attn: Environmental Reviewer
30 Emerson Avenue
Gloucester, MA 01930
Email: dmf.envreview-north@mass.gov

Also if yes, the project may require a Chapter 91 license. For coastal towns in the Northeast Region, please contact MassDEP's Boston Office. For coastal towns in the Southeast Region, please contact MassDEP's Southeast Regional Office.

- c. Is this an aquaculture project?

- d. Yes No

If yes, include a copy of the Division of Marine Fisheries Certification Letter (M.G.L. c. 130, § 57).



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C. Other Applicable Standards and Requirements (cont'd)

Online Users:
Include your document transaction number (provided on your receipt page) with all supplementary information you submit to the Department.

4. Is any portion of the proposed project within an Area of Critical Environmental Concern (ACEC)?
- a. Yes No If yes, provide name of ACEC (see instructions to WPA Form 3 or MassDEP Website for ACEC locations). **Note:** electronic filers click on Website.
- b. ACEC _____
5. Is any portion of the proposed project within an area designated as an Outstanding Resource Water (ORW) as designated in the Massachusetts Surface Water Quality Standards, 314 CMR 4.00?
- a. Yes No
6. Is any portion of the site subject to a Wetlands Restriction Order under the Inland Wetlands Restriction Act (M.G.L. c. 131, § 40A) or the Coastal Wetlands Restriction Act (M.G.L. c. 130, § 105)?
- a. Yes No
7. Is this project subject to provisions of the MassDEP Stormwater Management Standards?
- a. Yes. Attach a copy of the Stormwater Report as required by the Stormwater Management Standards per 310 CMR 10.05(6)(k)-(q) and check if:
1. Applying for Low Impact Development (LID) site design credits (as described in Stormwater Management Handbook Vol. 2, Chapter 3)
 2. A portion of the site constitutes redevelopment
 3. Proprietary BMPs are included in the Stormwater Management System.
- b. No. Check why the project is exempt:
1. Single-family house
 2. Emergency road repair
 3. Small Residential Subdivision (less than or equal to 4 single-family houses or less than or equal to 4 units in multi-family housing project) with no discharge to Critical Areas.

D. Additional Information

- This is a proposal for an Ecological Restoration Limited Project. Skip Section D and complete Appendix A: Ecological Restoration Notice of Intent – Minimum Required Documents (310 CMR 10.12).

Applicants must include the following with this Notice of Intent (NOI). See instructions for details.

Online Users: Attach the document transaction number (provided on your receipt page) for any of the following information you submit to the Department.

1. USGS or other map of the area (along with a narrative description, if necessary) containing sufficient information for the Conservation Commission and the Department to locate the site. (Electronic filers may omit this item.)
2. Plans identifying the location of proposed activities (including activities proposed to serve as a Bordering Vegetated Wetland [BVW] replication area or other mitigating measure) relative to the boundaries of each affected resource area.



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D. Additional Information (cont'd)

- 3. Identify the method for BVW and other resource area boundary delineations (MassDEP BVW Field Data Form(s), Determination of Applicability, Order of Resource Area Delineation, etc.), and attach documentation of the methodology.
- 4. List the titles and dates for all plans and other materials submitted with this NOI.

SITE PLAN

a. Plan Title

FLOW DESIGN INC.

DARGUIN FORTUNA

b. Prepared By

c. Signed and Stamped by

9.29.2022

1' = 20'

d. Final Revision Date

e. Scale

f. Additional Plan or Document Title

g. Date

- 5. If there is more than one property owner, please attach a list of these property owners not listed on this form.
- 6. Attach proof of mailing for Natural Heritage and Endangered Species Program, if needed.
- 7. Attach proof of mailing for Massachusetts Division of Marine Fisheries, if needed.
- 8. Attach NOI Wetland Fee Transmittal Form
- 9. Attach Stormwater Report, if needed.

E. Fees

- 1. Fee Exempt: No filing fee shall be assessed for projects of any city, town, county, or district of the Commonwealth, federally recognized Indian tribe housing authority, municipal housing authority, or the Massachusetts Bay Transportation Authority.

Applicants must submit the following information (in addition to pages 1 and 2 of the NOI Wetland Fee Transmittal Form) to confirm fee payment:

101

2. Municipal Check Number

6 OCTOBER 2022

3. Check date

102

4. State Check Number

6 OCTOBER 2022

5. Check date

ST. ANNE'S CREDIT UNION

SILVA

6. Payor name on check: First Name

7. Payor name on check: Last Name



Massachusetts Department of Environmental Protection
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F. Signatures and Submittal Requirements

I hereby certify under the penalties of perjury that the foregoing Notice of Intent and accompanying plans, documents, and supporting data are true and complete to the best of my knowledge. I understand that the Conservation Commission will place notification of this Notice in a local newspaper at the expense of the applicant in accordance with the wetlands regulations, 310 CMR 10.05(5)(a).

I further certify under penalties of perjury that all abutters were notified of this application, pursuant to the requirements of M.G.L. c. 131, § 40. Notice must be made by Certificate of Mailing or in writing by hand delivery or certified mail (return receipt requested) to all abutters within 100 feet of the property line of the project location.

	6 OCTOBER 2022
1. Signature of Applicant <i>Joycelyn Brad Deegan</i>	2. Date
	6 OCTOBER 2022
3. Signature of Property Owner (if different) <i>Peter Silva</i>	4. Date
	N/A
5. Signature of Representative (if any)	6. Date

For Conservation Commission:

Two copies of the completed Notice of Intent (Form 3), including supporting plans and documents, two copies of the NOI Wetland Fee Transmittal Form, and the city/town fee payment, to the Conservation Commission by certified mail or hand delivery.

For MassDEP:

One copy of the completed Notice of Intent (Form 3), including supporting plans and documents, one copy of the NOI Wetland Fee Transmittal Form, and a **copy** of the state fee payment to the MassDEP Regional Office (see Instructions) by certified mail or hand delivery.

Other:

If the applicant has checked the "yes" box in any part of Section C, Item 3, above, refer to that section and the Instructions for additional submittal requirements.

The original and copies must be sent simultaneously. Failure by the applicant to send copies in a timely manner may result in dismissal of the Notice of Intent.



Massachusetts Department of Environmental Protection
 Bureau of Resource Protection - Wetlands
NOI Wetland Fee Transmittal Form
 Massachusetts Wetlands Protection Act M.G.L. c. 131, §40

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



A. Applicant Information

1. Location of Project:

1309 SASSAQUIN AVENUE

a. Street Address

102

c. Check number

NEW BEDFORD

b. City/Town

d. Fee amount

2. Applicant Mailing Address:

JOYCELYN ABRA

a. First Name

DEGBOR

b. Last Name

c. Organization

1309 SASSAQUIN AVE

d. Mailing Address

NEW BEDFORD

e. City/Town

MA

f. State

02745

g. Zip Code

508.995.1488

h. Phone Number

i. Fax Number

ABRA@YOURPRCOMPANY.COM

j. Email Address

3. Property Owner (if different):

PETER

a. First Name

SILVA

b. Last Name

c. Organization

1309 SASSAQUIN AVE

d. Mailing Address

NEW BEDFORD

e. City/Town

MA

f. State

02745

g. Zip Code

508.951.8383

h. Phone Number

i. Fax Number

DEGBOR.SILVA2@COMCAST.NET

j. Email Address

B. Fees

Fee should be calculated using the following process & worksheet. **Please see Instructions before filling out worksheet.**

Step 1/Type of Activity: Describe each type of activity that will occur in wetland resource area and buffer zone.

Step 2/Number of Activities: Identify the number of each type of activity.

Step 3/Individual Activity Fee: Identify each activity fee from the six project categories listed in the instructions.

Step 4/Subtotal Activity Fee: Multiply the number of activities (identified in Step 2) times the fee per category (identified in Step 3) to reach a subtotal fee amount. Note: If any of these activities are in a Riverfront Area in addition to another Resource Area or the Buffer Zone, the fee per activity should be multiplied by 1.5 and then added to the subtotal amount.

Step 5/Total Project Fee: Determine the total project fee by adding the subtotal amounts from Step 4.

Step 6/Fee Payments: To calculate the state share of the fee, divide the total fee in half and subtract \$12.50. To calculate the city/town share of the fee, divide the total fee in half and add \$12.50.

To calculate filing fees, refer to the category fee list and examples in the instructions for filling out WPA Form 3 (Notice of Intent).



Massachusetts Department of Environmental Protection
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NOI Wetland Fee Transmittal Form
 Massachusetts Wetlands Protection Act M.G.L. c. 131, §40

B. Fees (continued)

Step 1/Type of Activity	Step 2/Number of Activities	Step 3/Individual Activity Fee	Step 4/Subtotal Activity Fee
1	1	\$110.00	\$110.00
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Step 5/Total Project Fee: \$110.00

Step 6/Fee Payments:

Total Project Fee:	<u>\$110.00</u>
State share of filing Fee:	<u>\$97.50</u>
City/Town share of filing Fee:	<u>\$122.50</u>
	a. Total Fee from Step 5
	b. 1/2 Total Fee less \$12.50
	c. 1/2 Total Fee plus \$12.50

C. Submittal Requirements

- a.) Complete pages 1 and 2 and send with a check or money order for the state share of the fee, payable to the Commonwealth of Massachusetts.

Department of Environmental Protection
 Box 4062
 Boston, MA 02211

- b.) **To the Conservation Commission:** Send the Notice of Intent or Abbreviated Notice of Intent; a copy of this form; and the city/town fee payment.

To MassDEP Regional Office (see Instructions): Send a copy of the Notice of Intent or Abbreviated Notice of Intent; a copy of this form; and a copy of the state fee payment. (E-filers of Notices of Intent may submit these electronically.)

One (1) hard copy Proof of property ownership/ Deed.

Signatures of owners, representatives, and applicants required on all application forms.

If the applicant is NOT the owner, they must comply with the 11/26/2006 memo from the City Solicitor's Office, (copy of memo can be found on Conservation webpage).

PLEASE RETURN TO:
Patricia B. Greenfield, Esq.
O'Leary Law Group, LLC
108 North Main Street
Raynham, MA 02767

BK 11192 PG 105
10/06/14 11:56 AM, 19729
Bristol Co. S.D.

QUITCLAIM DEED

We, Peter N. Silva and Joycelyn Abra Degbor, both of New Bedford, Bristol County, Massachusetts, husband and wife, as tenants by the entirety, for consideration paid of Ten (\$10.00) Dollars, grant to Peter N. Silva and Joycelyn A. Degbor, both of 1309 Sassaquin Avenue, New Bedford, Bristol County, Massachusetts, as Trustees of The Degbor-Silva Family Revocable Trust, created by indenture dated December 21, 2010, and as referenced in the Trustee's Certificate filed pursuant to M.G.L. c. 184 §35 and recorded herewith,

WITH QUITCLAIM COVENANTS

the land with the buildings and improvements thereon in said New Bedford, Bristol County, Massachusetts, bounded and described as follows:


See EXHIBIT "A" Legal Description attached hereto and made a part hereof.

Subject to all easements, rights, restrictions and reservations of record, to the extent currently in force and applicable.

For title, see deed of Candace A. Pothier, Paul F. Frey, Jr., Karen F. Landreville, Kevin F. Frey, Michael F. Frey, Kathy A. Frey and Peter F. Frey to Peter N. Silva and Joycelyn Abra Degbor, husband and wife, as tenants by the entirety, dated April 22, 2011, and recorded with the Bristol County (S.D.) Registry of Deeds, in Book 10045, Page 128.

TITLE NOT EXAMINED BY PREPARER.

WITNESS our hands and seals this 25 day of September, 2014.


Peter N. Silva


Joycelyn Abra Degbor

COMMONWEALTH OF MASSACHUSETTS

Bristol, ss.

September 25, 2014

Then personally appeared before me the above-named Peter N. Silva and proved to me through satisfactory evidence, which was MADE, to be the person who signed the attached Quitclaim Deed, and acknowledged to me that he signed it willingly and for its stated purpose,



[Signature]
 Notary Public
 My commission expires:



COMMONWEALTH OF MASSACHUSETTS

Bristol, ss.

September 25, 2014

Then personally appeared before me the above-named Joycelyn Abra Degbor and proved to me through satisfactory evidence, which was MADE, to be the person who signed the attached Quitclaim Deed, and acknowledged to me that she signed it willingly and for its stated purpose,



[Signature]
 Notary Public
 My commission expires:



PLEASE RETURN TO:
 Pamela B. Greenfield, Esq.
 Orlan Law Group, LLC
 108 North Main Street
 Raytheon, MA 02767

K:\Client\Degbor_Abra\2014\20140925\Bristol_Quitclaim_Peter_Silva.docx

EXHIBIT "A"
 Legal Description
 1309 Sassaquin Avenue, New Bedford, MA

The land, with the building(s) thereon, located at Sassaquin Pond, being a part of Clifford Park, so-called in New Bedford, Bristol County, Massachusetts, more particularly bounded and described as follows:

PARCEL ONE:

Beginning at a point in the east line of Sassaquin Avenue, formerly called Broadway, at its intersection with the northerly line of Fir Avenue extended easterly;
 Thence in a general EASTERLY direction to a boundstone on the shore of Sassaquin Pond approximately one hundred thirty-eight and 00/100 (138.00) feet southerly from a stone bound located near said shore in the north line of property described in a deed recorded at the Bristol County (S.D.) Registry of Deeds in Book 1099, Page 409;
 Thence continuing EASTERLY in the same course to the Miles-Parker line, so-called, referred to in said deed;
 Thence SOUTHERLY in said Miles-Parker line to its intersection with the last bound hereinafter mentioned;
 Thence beginning again at the point of beginning;
 Thence SOUTHERLY about 22° 6' west in said east line of said Sassaquin Avenue thirty (30) feet to an old wall and land formerly of Hawes and Wilbur, being now the south line of said Fir Avenue;
 Thence by said Hawes and Wilbur land SOUTHERLY 81° 43' east forty-one and 75/100 (41.75) feet, more or less, to an old bound at a corner;
 Thence running a little EASTERLY of south by said Hawes and Wilbur land in line of an old fence and a continuation of said line of fence to said Pond and continuing in the same course southerly through said Pond to the Miles-Parker line above-described.

Meaning and intending to convey the property described in a deed dated November 6, 1953, and recorded at the Bristol County (S.D.) Registry of Deeds in Book 1099, Page 409.

PARCEL TWO:

Beginning at the southwesterly corner thereof at a point in the east line of Broadway, presently called Sassaquin Avenue, and at the northwesterly corner of land described in a deed recorded at the Bristol County (S.D.) Registry of Deeds in Book 1099, Page 409;
 Thence NORTHERLY in line of said Broadway sixty-six and 62/100 (66.62) feet, more or less, to land formerly of William E. James and conveyed by him to Joseph Marshall, Jr. in 1947;
 Thence EASTERLY in line of last named land twenty-four and 7/100 (24.07) feet, more or less to a stone bound;
 Thence continuing in line of said Marshall land SOUTHERLY 77° east, two hundred forty (240) feet more or less over a stone bound to the shore of said Sassaquin Pond; and in the same course into said Pond to the Miles-Parker line, so-called;

Thence SOUTHEASTERLY by the said Miles-Parker line one hundred thirty-eight (138) feet, more or less, to the northeasterly corner of other land;

Thence WESTERLY from said Miles-Parker line to a boundstone on the shore of said Pond; and Thence WESTERLY still three hundred twenty (320) feet, more or less, to the point of beginning.

Meaning and intending to convey the property described in a deed dated January 7, 1957, and recorded at the Bristol County (S.D.) Registry of Deeds in Book 1206, Page 238.

EXCLUDING FROM THE FOREGOING DESCRIPTION, however, the premises previously conveyed out in the following deeds:

1. Deed from Paul F. Frey and Grace E. Frey to Francis J. Frey and Lucille H. Frey dated August 11, 1960, and recorded at the Bristol County (S.D.) Registry of Deeds in Book 1328, Page 86.
2. Deed from Paul F. Frey and Grace E. Frey to Francis J. Frey and Lucille H. Frey dated June 1, 1979, and recorded at the Bristol County (S.D.) Registry of Deeds in Book 1785, Page 468.

Two (2) hard copy sets of
full-size (24"x 36") plans,
drawings, and other supporting
documents

- delivered to Conservation Office

(City of New Bedford Conservation Commission •
Department of Environmental Stewardship
133 William Street Room 304 New Bedford, Massachusetts 02740).

1309 SASSAQUIN AVE - COMPLETE RENO

J. ABRA DEGBOR & PETER N. SILVA

1309 SASSAQUIN AVENUE, NEW BEDFORD, MA 02745

FLOW PROJECT #22270

PERMIT SET

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1309 SASSAQUIN AVE - COMPLETE RENO

1309 SASSAQUIN AVENUE,
NEW BEDFORD, MA 02745

J. ABRA DEGBOR & PETER N. SILVA

ARCHITECT:

Flow Design Inc.

ARCHITECTURE ■ SALEM, MA 01970
RESIDENTIAL DESIGN 50 GROVE ST. SUITE 226
PLANNING SALEM, MA 01970
INTERIOR DESIGN TEL: 978.498.4370
CEL: 978.818.5109
CEL: 774.317.0491

CIVIL ENGINEER:

FARLAND CORP.
21 VENTURA DRIVE,
DARTMOUTH, MA 02747
TEL: 508-717-3479

GENERAL CONTRACTOR:

MR. JIM O'MARA
38 LAKE DRIVE,
SOUTH PLYMOUTH, MA 02360
TEL: 508-221-0177

REVISION:

NO:	DATE:	DESCRIPTION:
1	09.29.2022	PERMIT SET

PROJECT TEAM

OWNER:

J. ABRA DEGBOR & PETER N. SILVA

1309 SASSAQUIN AVENUE,
NEW BEDFORD, MA 02745

TEL: 617-999-3783

ARCHITECTURE :

FLOW DESIGN ARCHITECTS

50 GROVE ST. SUITE 226

SALEM, MA 01970

TEL: 978-498-4370

GENERAL CONTRACTOR:

MR. JIM O'MARA

38 LAKE DRIVE,

SOUTH PLYMOUTH, MA 02360

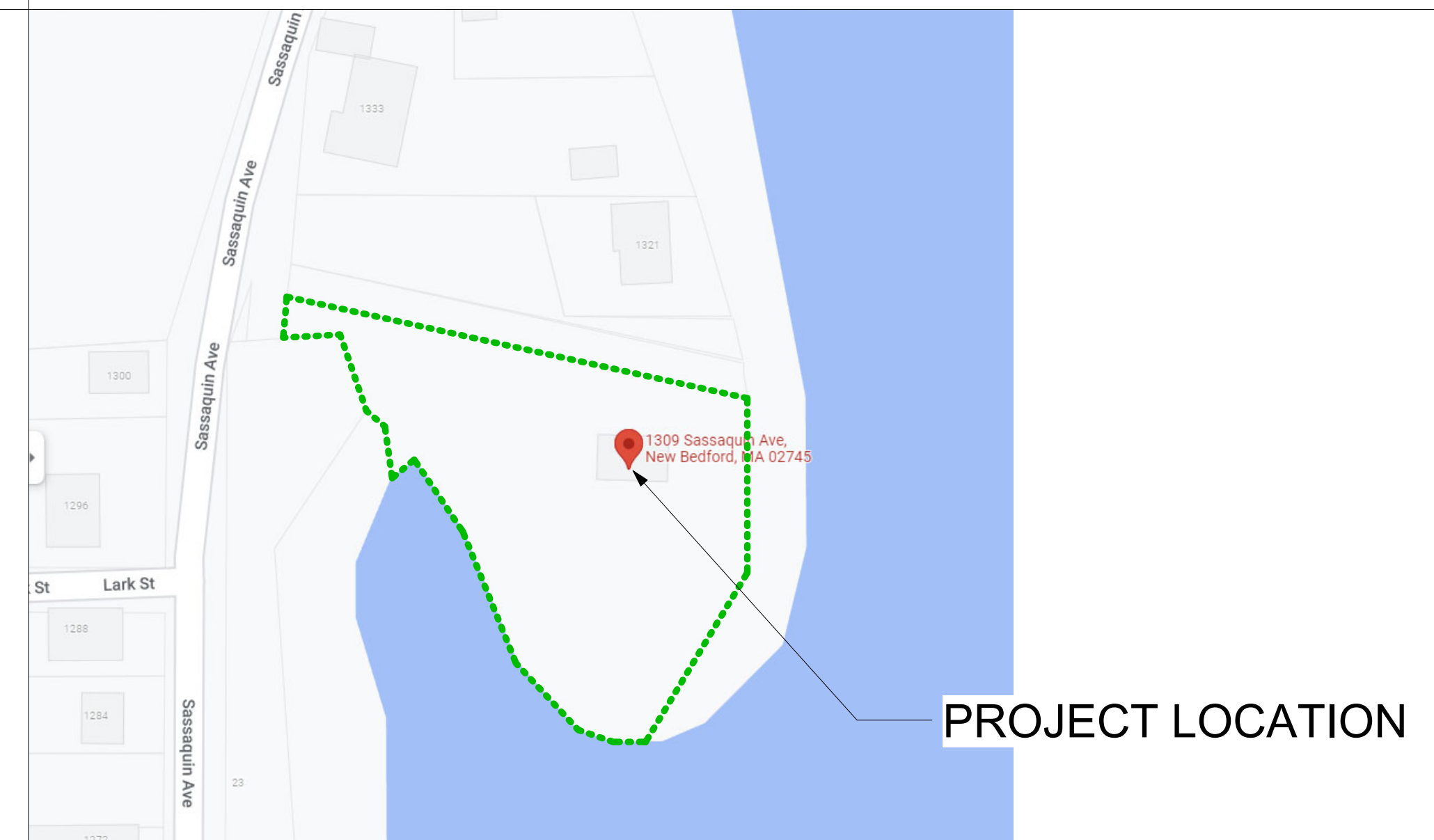
TEL: 508-221-0177

PERSPECTIVE VIEW



FOR ILLUSTRATION PURPOSES ONLY

AERIAL VIEW



GENERAL INFORMATION

THE EXISTING PROPERTY AT 1309 SASSAQUIN AVE. IS A TWO-STORY WOOD FRAMED STRUCTURE. THE EXISTING RESIDENCE IS A ONE-FAMILY RESIDENTIAL USE. THE SCOPE OF WORK INCLUDES A FULL HOME RENO.

DRAWING TITLE:

TITLE SHEET

DRAWN BY:

GL

CHECKED BY:

MS

SCALE:

N.T.S

DATE:

09.29.2022

PROJECT NO.:

22270

DRAWING NO.:

T-100

SEAL:



PROJECT LOCATION:
Y:\Flow\Projects\Architecture\2022\22270 1309 SASSAQUIN AVE, NEW BEDFORD, MA - COMPLETE RENOVATION\Rev01\22270 1309 SASSAQUIN AVE_PERMIT SET.dwg

ABBREVIATIONS

A.C.P. ACQUSTIC CEILING PANEL	K KIP	L.B.L. LABEL
A/C AIR CONDITION	L.A.V. LAVATORY	L.G. LENGTH, LONG
A.F.F. ABOVE FINISH FLOOR	L.G. LENGTH, LONG	L.N.T.L. UNTEL
ALUM ALUMINUM	L.V.R. LOWER	L.P. LOW POINT
A.B. ANCHOR BOLT	M.H. MANHOLE	M. MARBLE
& AND	M. MASONRY	M.O. MASONRY OPENING
APPROX. APPROXIMATELY	M.A.T.L. MATERIAL	M.E.C.H. MECHANICAL
ARCH ARCHITECTURAL	M.I.N. MINIMUM	M.I.S.C. MISCELLANEOUS
A&G ASPHALT & GRAVEL	M.I.T.G. MOUNTING	N.O.M. NOMINAL
B.L. BASE LINE	M.T.L. MATERIAL	N.I.C. NOT IN CONTRACT
B.P.L. BASE PLATE	M.T.L. MATERIAL	N.O.T. TO SCALE
BEAM BEAM	M.T.L. MATERIAL	N.O., # NUMBER
B.P.C. BED PAN	M.T.L. MATERIAL	N.C. NURSE CALL
BLK'G BLOCKING	M.T.L. MATERIAL	N.C. OFFICE
B.W. BOTH SIDES	M.T.L. MATERIAL	N.C. ON CENTER
B.W. BOTH WAYS	M.T.L. MATERIAL	N.C. OPENING
B.O.T. BOTTOM	M.T.L. MATERIAL	N.C. OPPOSITE
BRK. BRICK	M.T.L. MATERIAL	O.Z. OUNCE
BLDG. BUILDING	M.T.L. MATERIAL	O.D. OUTSIDE DIAMETER
B/ BOTTOM OF ---	M.T.L. MATERIAL	O.F. OUTSIDE FACE
C.F.T. CARPET	M.T.L. MATERIAL	O.A. OVERALL
CLG. CEILING	M.T.L. MATERIAL	O.H.D. OVERHEAD DOOR
CL. CENTER LINE	M.T.L. MATERIAL	O.F.I. OWNER FURNISHED AND INSTALLED
C.T.C. CERAMIC TILE COVE	M.T.L. MATERIAL	O.F.P. OWNER FURNISHED CONTRACTOR INSTALLED
C.T. CERAMIC TILE	M.T.L. MATERIAL	O.T. OPERATOR TUBE SYSTEM
CERM. CERAMIC TILE	M.T.L. MATERIAL	P.N.L. PAINTED
C.F. CEMENT FIBERBOARD	M.T.L. MATERIAL	P.N.L. PANEL
C.L.F. CHAIN LINK FENCE	M.T.L. MATERIAL	P.H. PARTIAL HEIGHT
CR. CHAIR RAIL	M.T.L. MATERIAL	P.F. PARTICLE FILLED
C.O. CLEAN OUT	M.T.L. MATERIAL	P.T.N. PARTITION
CLR. CLEAR(ANCE)	M.T.L. MATERIAL	P.L.A.S. PLASTIC
CLSR. CLOSER	M.T.L. MATERIAL	P.L. PLASTIC
CLS. CLOSET	M.T.L. MATERIAL	P.L.A.M. PLASTIC LAMINATE
CHK. COAT HOOK	M.T.L. MATERIAL	P.L.U.M. PLUMBING
COL. COLUMN	M.T.L. MATERIAL	P.L.U.M. PLUMBING
C.M. COCOA MAT	M.T.L. MATERIAL	P.O.U.N.D. POUNDS / SQUARE INCH
CONC. CONCRETE	M.T.L. MATERIAL	P.P.S.I. POUNDS / SQUARE FOOT
C.B. CONCRETE BLOCK	M.T.L. MATERIAL	P.P.F. PREFINISHED
CONC. BD. CONCRETE BOUND	M.T.L. MATERIAL	P.P.M. PRESSED METAL
C.M.U. CONCRETE MASONRY UNIT	M.T.L. MATERIAL	P.R.O.P. PROPERTY / PROPOSED
CONSTR. CONSTRUCTION	M.T.L. MATERIAL	Q.T. QUARRY TILE
CONT. CONTINUOUS	M.T.L. MATERIAL	Q.T.C. QUARRY TILE COVE
C.J. CONTROL JOINT	M.T.L. MATERIAL	R. RADIUS / RISER
C.S. CORNER GUARD	M.T.L. MATERIAL	R.E.C. RECEPTICLE / ELECTRICAL
CORR. CORRIDOR	M.T.L. MATERIAL	R.P.H. RADIUS / RISER
CTSK. COUNTERSUNK	M.T.L. MATERIAL	REF. REFERENCE
CRS. COURSE	M.T.L. MATERIAL	REIN.F. REINFORCE(ING)
CYL. CYLINDER	M.T.L. MATERIAL	REMO. REMOVE
CH. CEILING HEIGHT	M.T.L. MATERIAL	REQ'D. REQUIRED
DEPT. DEPARTMENT	M.T.L. MATERIAL	REV. REVISION / REVERSE
DEP. DEPRESSION	M.T.L. MATERIAL	R.F. RIGID FRAME
DIAG. DIAGONAL	M.T.L. MATERIAL	R.D. ROAD
DIM. DIMENSION	M.T.L. MATERIAL	R.D. ROOF DRAIN
D.O. DITCH	M.T.L. MATERIAL	R.W.L. RAIN WATER LEADER
DR. DOOR	M.T.L. MATERIAL	R.G.H. ROUGH
D.L. DOCK LEVELER	M.T.L. MATERIAL	SECT. SECTION
D.A. DOUBLE ACTING	M.T.L. MATERIAL	S.S. SERVICE SINK
D.S. DOWNSPOUT	M.T.L. MATERIAL	S.S. STAINLESS STEEL
D. DRAW	M.T.L. MATERIAL	S.H.V. SHEET VINYL
DWG. DRAWING	M.T.L. MATERIAL	S.W. SHOP WELD
D.W. DRYWALL	M.T.L. MATERIAL	S.L.D.R. SLIDING DOOR
E.A. EACH	M.T.L. MATERIAL	S.C. SOLID CORE
E.F. EACH FACE	M.T.L. MATERIAL	S.P.E.C. SPECIFICATION
E.W. ELECTRIC	M.T.L. MATERIAL	S.P.R. SPRINKLER
ELEC. ELECTRIC	M.T.L. MATERIAL	S.Q. FT. SQUARE FEET
E.W.C. ELECTRIC WATER COOLER	M.T.L. MATERIAL	STD. STANDARD
ELEV. ELEVATION	M.T.L. MATERIAL	STL. STEEL
EL. ELEVATION	M.T.L. MATERIAL	STRUC. STRUCTURAL
ENCL. ENCLOSURE	M.T.L. MATERIAL	SUSP. SUSPENDED
ENG. ENGINEER(ING)	M.T.L. MATERIAL	SYMM. SYMMETRICAL
ENT. ENTRANCE	M.T.L. MATERIAL	TELE. TELEPHONE
EQ. EQUAL	M.T.L. MATERIAL	TLB. THOUSAND POUND
EQUIP. EQUIPMENT	M.T.L. MATERIAL	THRD. THRESHOLD
EXIST. EXISTING	M.T.L. MATERIAL	T.O.I.L. TOILET
EXP. EXPANSION, EXPOSED	M.T.L. MATERIAL	TOP OF ...
E.B. EXPANSION BOLT	M.T.L. MATERIAL	T.B. TOWEL BAR
E.J. EXPANSION JOINT	M.T.L. MATERIAL	TRU-GLAZE
EXTER. EXTERIOR	M.T.L. MATERIAL	T. TREAD
F.B. FACE BRICK	M.T.L. MATERIAL	TYP. TYPICAL
F/ FACE OF ...	M.T.L. MATERIAL	UC. UNDERCUT
F. TO F. FACE TO FACE	M.T.L. MATERIAL	UNF. UNFINISHED
FT. FEET, FOOT	M.T.L. MATERIAL	U.N.O. UNLESS NOTED OTHERWISE
F.W. FIELD WELD	M.T.L. MATERIAL	V.P. VENT PIPE
FIN. FINISH	M.T.L. MATERIAL	VERT. VERTICAL
F.E.C. FIRE EXTINGUISHER CABINET	M.T.L. MATERIAL	VIN. VINYL
F.H.C. FIRE HOSE CABINET	M.T.L. MATERIAL	V.I.F. VERIFY IN FIELD
FLASHG. FLASHING	M.T.L. MATERIAL	V.C.T. VINYL COMPOSITION TILE
FLR. FLOOR	M.T.L. MATERIAL	V.B.C. VINYL BASE COVE
FLR'G. FLOORING	M.T.L. MATERIAL	V.B.S. VINYL BASE STRAIGHT
F.D. FLOOR DRAIN	M.T.L. MATERIAL	V.T.R. VENT THRU ROOF
FLUOR. FLUORESCENT	M.T.L. MATERIAL	V.W.C. VINYL WALL COVERING
FTG. FOOTING	M.T.L. MATERIAL	WSCT. WAINSCOT
FRT. FIRE RETARDANT TREATED	M.T.L. MATERIAL	W.C. WATER CLOSET
FDN. FOUNDATION	M.T.L. MATERIAL	WT. WEIGHT
F/H. FULL HEIGHT	M.T.L. MATERIAL	W.W.F. WELDED WIRE FABRIC
FUS.LINK. FUSIBLE LINK	M.T.L. MATERIAL	W.G. WIRE GLASS
GA. GAGE OR GAUGE	M.T.L. MATERIAL	W.M. WIRE MESH
GALV. GALVANIZED	M.T.L. MATERIAL	W/ WITH
G.C. GENERAL CONTRACTOR	M.T.L. MATERIAL	W/O WITHOUT
GL. GLASS	M.T.L. MATERIAL	WD. WOOD
GB. GRAB RAIL	M.T.L. MATERIAL	WB. WOOD BASE
GYP. BD. GYPSUM WALLBOARD	M.T.L. MATERIAL	W.P. WORKING POINT
G.W.B. GYPSUM WALLBOARD	M.T.L. MATERIAL	W.P. WATER PROOF
HDCP. HANDICAP	M.T.L. MATERIAL	
HWDR. HARDWARE	M.T.L. MATERIAL	
H.D. HEAVY DUTY	M.T.L. MATERIAL	
HGT., HT. HEIGHT	M.T.L. MATERIAL	
H.C. HOLLOW CORE	M.T.L. MATERIAL	
H.M. HOLLOW METAL	M.T.L. MATERIAL	
HORIZ. HORIZONTAL	M.T.L. MATERIAL	
H.B. HOSE BIBB	M.T.L. MATERIAL	
H.W.H. HOT WATER HEATER	M.T.L. MATERIAL	
HUMI. HUMIGUARD CEILING	M.T.L. MATERIAL	
IN. INCHES	M.T.L. MATERIAL	

CODES & STANDARDS

Residential Code

INTERNATIONAL RESIDENTIAL CODE - 2015 WITH MA. AMENDMENTS 780 CMR 51

Energy

INTERNATIONAL ENERGY CONSERVATION CODE- 2015 EDITION W/ MA. AMENDMENTS

ZONING REVIEW:

1. ZONING DISTRICT
NEW BEDFORD, MA - RESIDENTIAL A

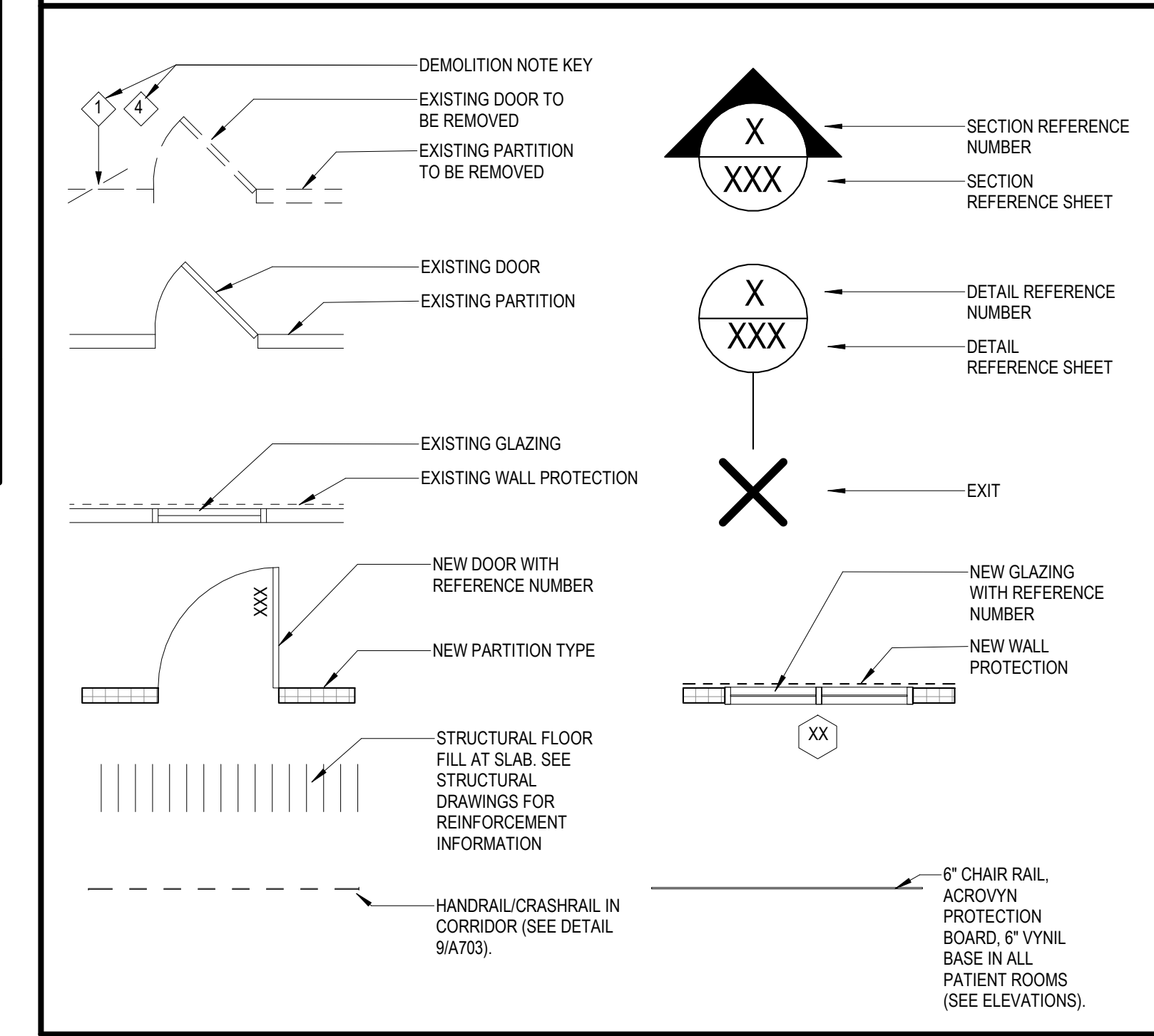
2. GENERAL REQUIREMENTS

SECTION	APPLICABILITY	DESCRIPTION	REQUIRED
SINGLE-FAMILY DWELLING	YES	<input type="checkbox"/> Minimum Lot Area (square feet) : <input type="checkbox"/> Minimum Lot Frontage (feet) : <input type="checkbox"/> Minimum Front Yard (feet) : <input type="checkbox"/> Minimum Side Yard (feet) : <input type="checkbox"/> Minimum Rear Yard (feet) : <input type="checkbox"/> Green Space : <input type="checkbox"/> Maximum Building Height (feet) : <input type="checkbox"/> Max. Lot Coverage :	8,000 75 20 10 & 20 30 35% 45 30%
3. PROPOSED	DECK AT FIRST FLOOR	931 +/- SF	
	SECOND FLOOR	253 +/- SF	
	DECK AT SECOND FLOOR	173 +/- SF	
4. TOTAL		1,357 +/- SF	

SHEET LIST

SHEET NUMBER	SHEET NAME	INITIAL ISSUE DATE	DESCRIPTION
T-100	TITLE SHEET	09.29.2022	PERMIT SET
T-101	SHEET LIST, NOTES AND LEGENDS	09.29.2022	PERMIT SET
LIFE SAFETY			
LS-00	LIFE SAFETY PLAN	09.29.2022	PERMIT SET
LS-01	LIFE SAFETY PLAN	09.29.2022	PERMIT SET
CIVIL ENGINEER			
C-1	EXISTING PLOT PLAN SURVEY	09.26.2022	
EXISTING ARCHITECTURAL			
AEX-100	EXISTING FLOOR PLANS	09.29.2022	PERMIT SET
AEX-101	EXISTING FLOOR PLANS	09.29.2022	PERMIT SET
AEX-200	EXISTING ELEVATIONS	09.29.2022	PERMIT SET
DEMO ARCHITECTURAL			
AD-100	DEMO FLOOR PLANS	09.29.2022	PERMIT SET
AD-101	DEMO FLOOR PLANS	09.29.2022	PERMIT SET
AD-200	DEMO ELEVATIONS	09.29.2022	PERMIT SET
ARCHITECTURAL			
A-100	PROPOSED SITE PLAN	09.29.2022	PERMIT SET
A-101	PROPOSED FLOOR PLANS	09.29.2022	PERMIT SET
A-102	PROPOSED FLOOR PLANS	09.29.2022	PERMIT SET
A-103	PROPOSED ROOF PLAN	09.29.2022	PERMIT SET
A-200	PROPOSED EXT. ELEVATIONS	09.29.2022	PERMIT SET
A-300	BUILDING SECTIONS	09.29.2022	PERMIT SET
A-631	SECTIONS & PARTITIONS	09.29.2022	PERMIT SET
A-700	REFLECTED CEILING PLANS	09.29.2022	PERMIT SET
A-800	FINISH FLOOR PLAN	09.29.2022	PERMIT SET
A-900	COORDINATION PLANS	09.29.2022	PERMIT SET
FRAMING PLANS			
FP-900	FRAMING PLAN DECK	09.29.2022	PERMIT SET

GENERAL LEGEND



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1309 SASSAQUIN AVE - COMPLETE RENO

1309 SASSAQUIN AVENUE,
NEW BEDFORD, MA 02745

J. ABRA DEGBOR & PETER N. SILVA

ARCHITECT:



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RESIDENTIAL DESIGN 50 GROVE ST., SUITE 226
PLANNING SALEM, MA 01970
INTERIOR DESIGN TEL: 978.498.4370
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CIVIL ENGINEER:

FARLAND CORP.
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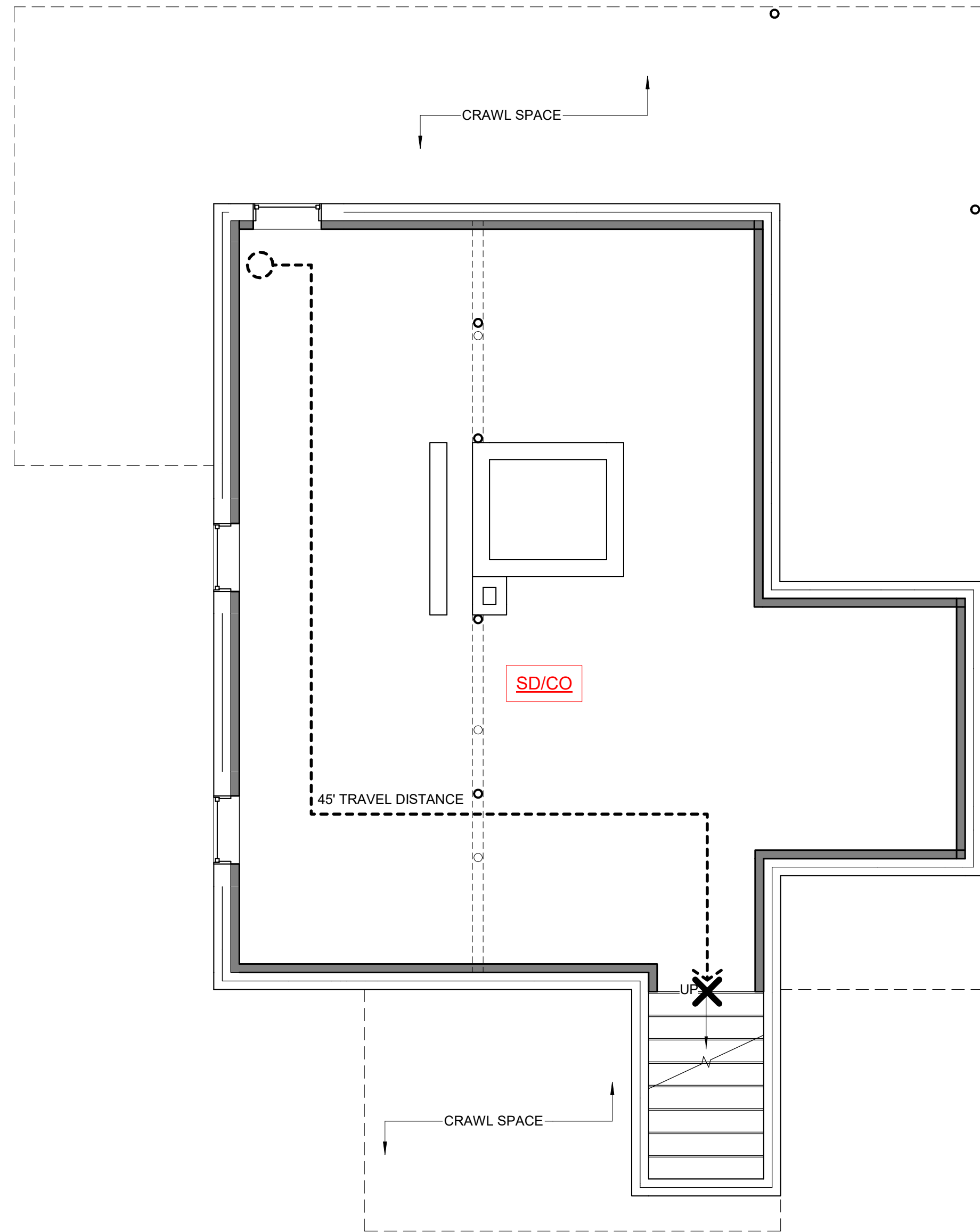
REVISION:

NO.	DATE:	DESCRIPTION:
1	09.29.2022	PERMIT SET

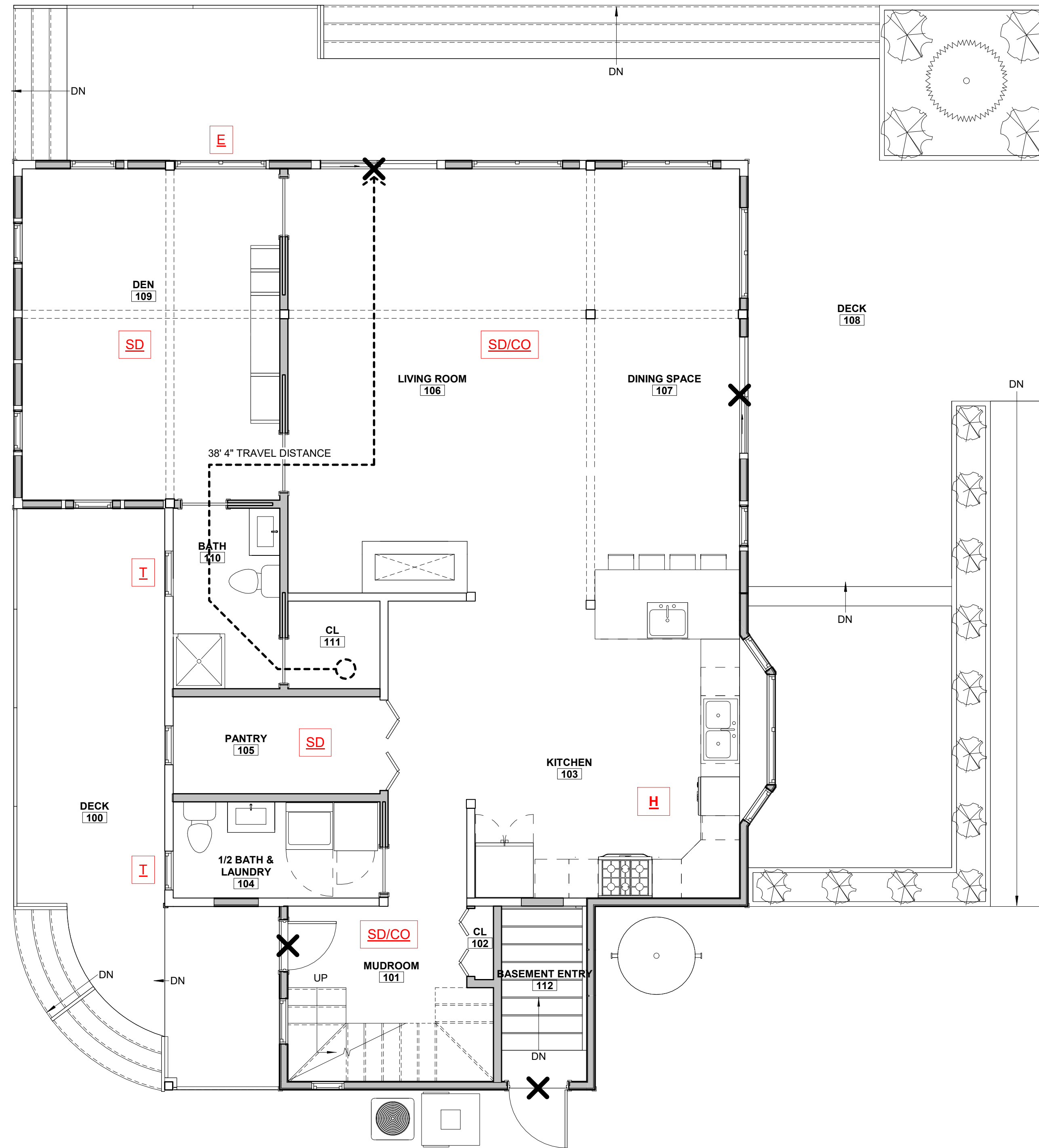
DRAWING TITLE: SHEET LIST, NOTES AND LEGENDS

DRAWN BY: GL	SEAL:
CHECKED BY: MS	
SCALE: As indicated	
DATE: 09.29.2022	
PROJECT NO.: 22270	

DRAWING NO.:
T-101



1 PROPOSED BASEMENT LIFE SAFETY PLAN
1/4" = 1'-0"



2 PROPOSED FIRST LIFE SAFETY PLAN
1/4" = 1'-0"

INTERNATIONAL RESIDENTIAL CODE 2015 W/
MA AMMENDMENTS 780 CMR 51 RESIDENTIAL
BUILDING CODE:

Smoke alarms shall be the photoelectric type listed in accordance with UL 217 or UL 268. Combination smoke and carbon monoxide alarms shall be listed in accordance with UL 217 and UL 2034. (R314.1.1). Hardwired and interconnected smoke alarms shall be required in the following locations as per International Residential Code for 1 and 2 Family Dwellings R314.3 with Massachusetts Amendments:

- In each sleeping room
- Outside each separate sleeping area in the immediate vicinity of the bedrooms.
- On each additional story of the dwelling, including basements and habitable attics but not including crawl spaces and uninhabitable attics.
- In dwellings or dwelling units with split level and without an intervening door between the adjacent levels, a smoke alarm installed on the upper level shall suffice for the adjacent lower level provided that the lower level is less than one full story below the upper level.
- Smoke alarms shall be installed not less than 3 feet horizontally from the door opening of a bathroom that contains a bathtub or shower unless this would prevent placement of a smoke alarm required by section R314.3
- For each 1,000 sf of area or part thereof.
- Near all stairs

A single heat detector listed for the ambient environment shall be installed in:

- Any garage attached to or under the dwelling (detached garages do not require a heat detector).
- A new garage attached to an existing dwelling. If the existing house contains a fire detection system that is compatible with the garage heat detector, then the detector shall be interconnected to that system. Where the existing system is not compatible with the garage heat detector, the garage heat detector shall be connected to an alarm or compatible heat detector containing an alarm, located in the dwelling and within 20 ft of the nearest door to the garage from the dwelling. An alarm is not required in the garage, either integral or separate from the heat detector.

R315.53 Carbon monoxide alarms in dwelling units shall be outside of each separate sleeping area within ten feet of the bedrooms. Where a fuel burning appliance is located within a bedroom or its attached bathroom, a carbon monoxide alarm shall be installed within the bedroom. At least one alarm shall be installed on each story of a dwelling unit, including basements and cellars but not in crawl spaces and uninhabitable attics.

LIFE SAFETY LEGEND

	EXIT LOCATION
	EXTERIOR EXIT DOOR
	LENGTH OF TRAVEL - EGRESS
	SMOKE DETECTOR
	SMOKE DETECTOR & CARBON MONOXIDE COMBO
	EGRESS WINDOW AT LEAST ONE SHALL COMPLY @ EACH BEDROOM IF NOT ALL
	TEMPERED GLASS LOCATION AS PE CODE
	HEAT DETECTOR

PROJECT SPECIFIC NOTES

- (A) 1 HOUR RATED SEPARATION PER IBC 2015 TABLE 508.2.5

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GENERAL CONTRACTOR:
MR. JIM O'MARA
38 LAKE DRIVE,
SOUTH PLYMOUTH, MA 02360
TEL: 508-221-0177

REVISION:

NO:	DATE:	DESCRIPTION:
1	09.29.2022	PERMIT SET

DRAWING TITLE:
LIFE SAFETY PLAN

DRAWN BY:
GL

CHECKED BY:
MS

SCALE:
As indicated

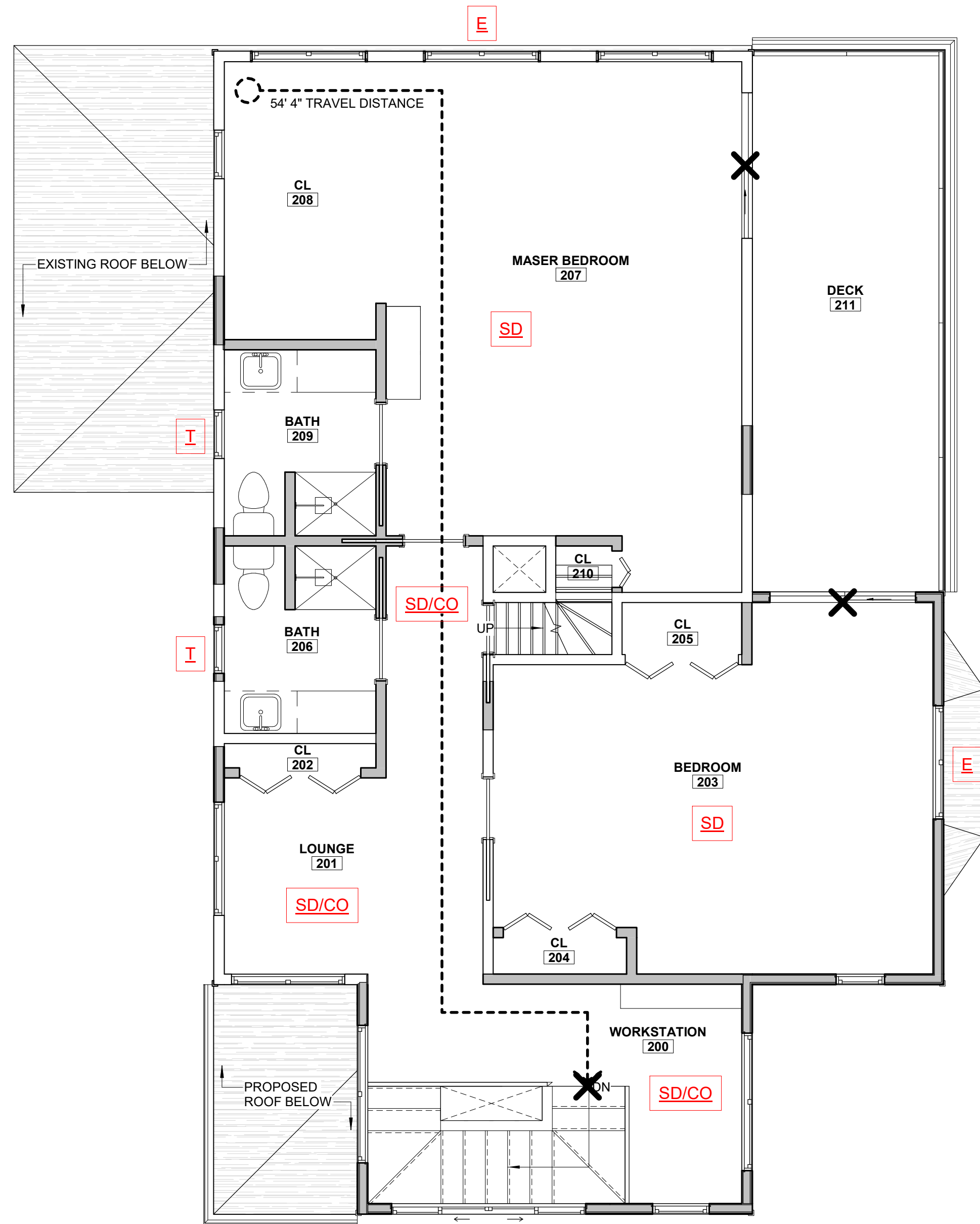
DATE:
09.29.2022

PROJECT NO.:
22270

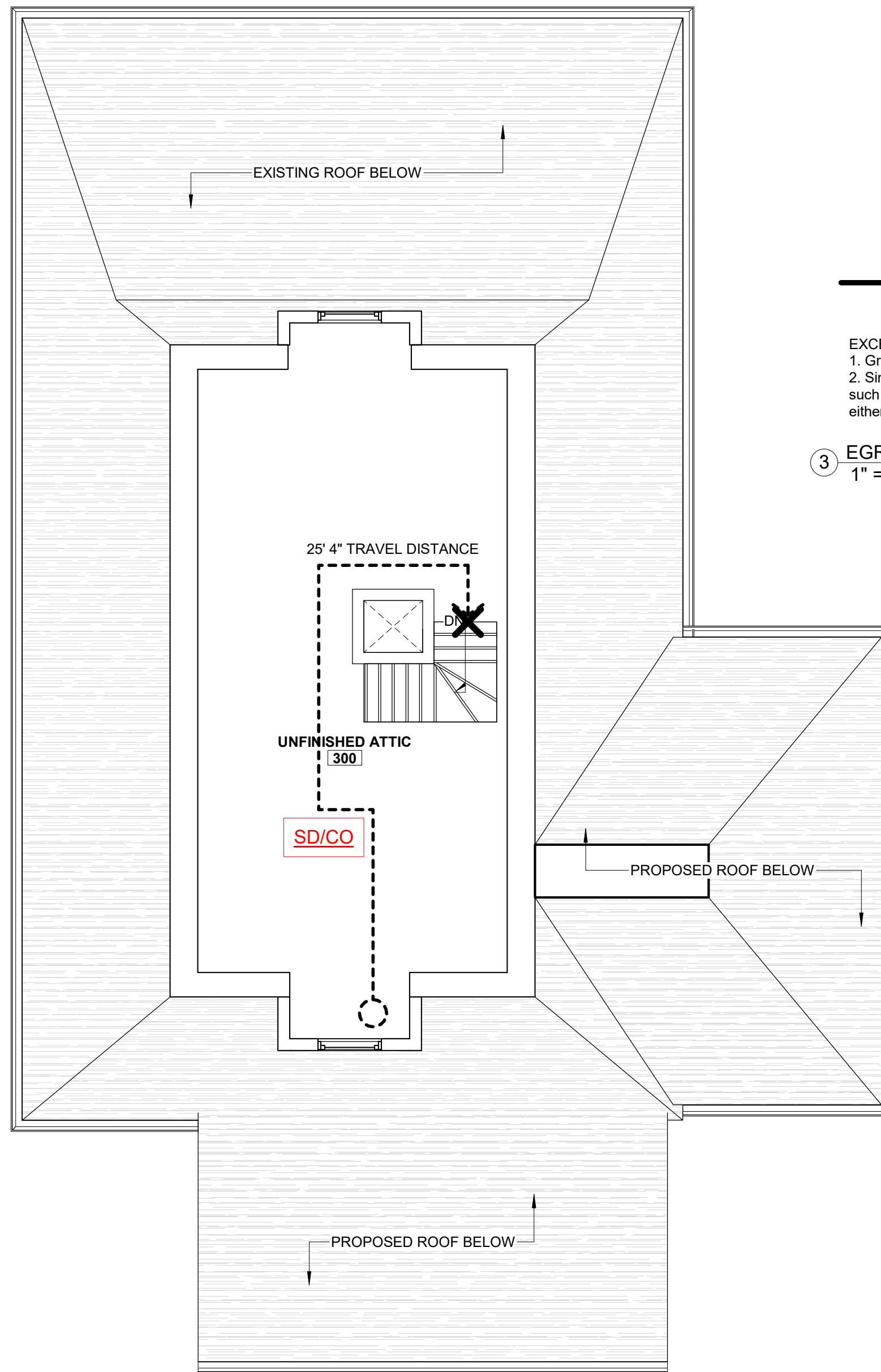


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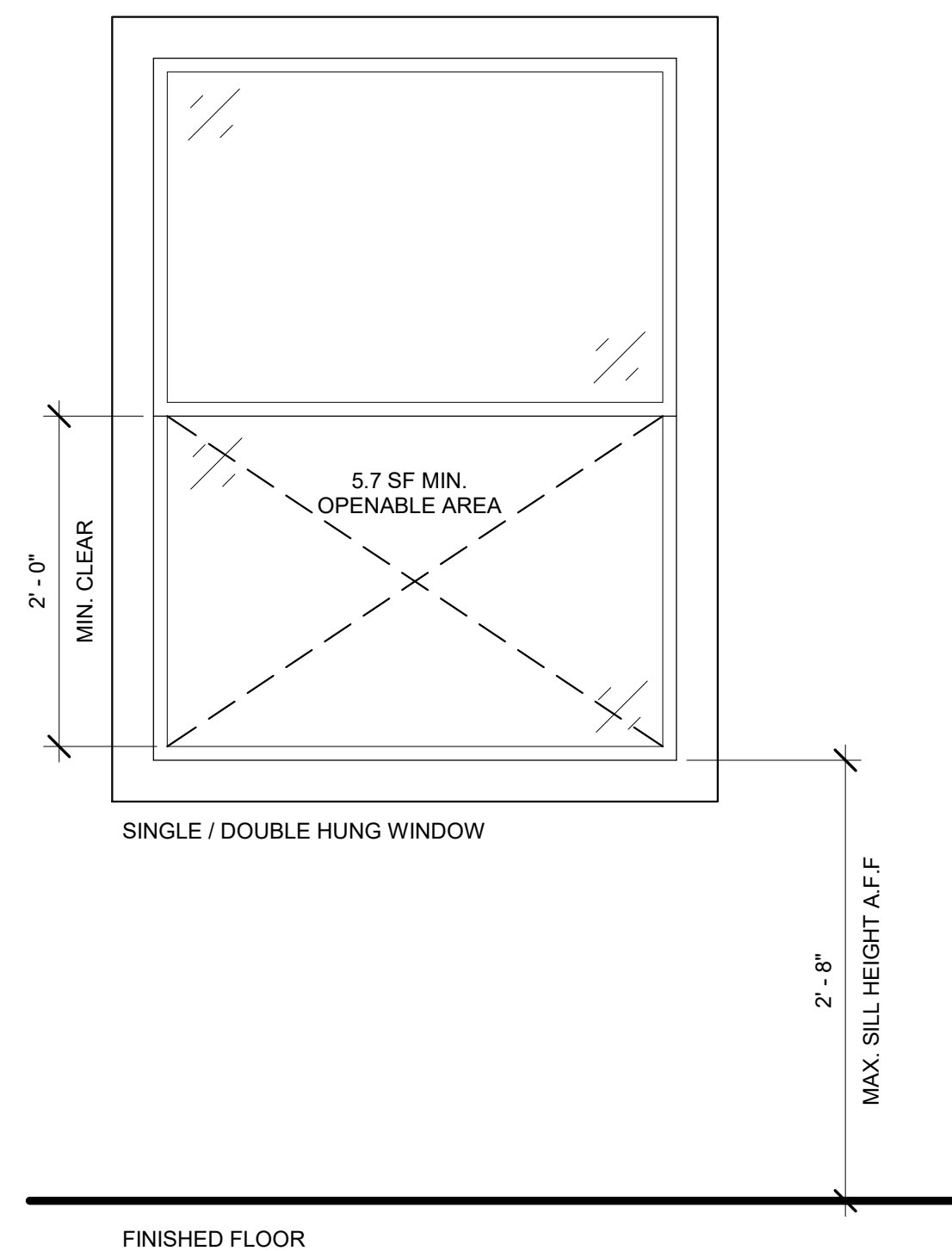
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1 PROPOSED SECOND LIFE SAFETY PLAN
1/4" = 1'-0"



2 PROPOSED THIRD LIFE SAFETY PLAN
1/4" = 1'-0"



EXCEPTIONS:
1. Grade floor or below grade openings shall have a net clear opening of not less than **five ft2**.
2. Single-hung and/or double hung windows shall have a minimum net clear opening of **3.3 ft2**. In such cases, the minimum net clear opening dimensions shall be **20 inches by 24 inches** in either direction.

3 EGRESS WINDOW REQUIREMENTS
1" = 1'-0"

INTERNATIONAL RESIDENTIAL CODE 2015 W/ MA AMMENDMENTS 780 CMR 51 RESIDENTIAL BUILDING CODE:

Smoke alarms shall be the photoelectric type listed in accordance with UL 217 or UL 268. Combination smoke and carbon monoxide alarms shall be listed in accordance with UL 217 and UL 2034. (R314.1.1). Hardwired and interconnected smoke alarms shall be required in the following locations as per International Residential Code for 1 and 2 Family Dwellings R314.3 with Massachusetts Amendments:

- In each sleeping room
- Outside each separate sleeping area in the immediate vicinity of the bedrooms.
- On each additional story of the dwelling, including basements and habitable attics but not including crawl spaces and uninhabitable attics.
- In dwellings or dwelling units with split level and without an intervening door between the adjacent levels, a smoke alarm installed on the upper level shall suffice for the adjacent lower level provided that the lower level is less than one full story below the upper level.
- Smoke alarms shall be installed not less than 3 feet horizontally from the door opening of a bathroom that contains a bathtub or shower unless this would prevent placement of a smoke alarm required by section R314.3
- For each 1,000 sf of area or part thereof.
- Near all stairs

A single heat detector listed for the ambient environment shall be installed in:

- Any garage attached to or under the dwelling (detached garages do not require a heat detector).
- A new garage attached to an existing dwelling. If the existing house contains a fire detection system that is compatible with the garage heat detector, then the detector shall be interconnected to that system. Where the existing system is not compatible with the garage heat detector, the garage heat detector shall be connected to an alarm or compatible heat detector containing an alarm, located in the dwelling and within 20 ft of the nearest door to the garage from the dwelling. An alarm is not required in the garage, either integral or separate from the heat detector.

R315.53 Carbon monoxide alarms in dwelling units shall be outside of each separate sleeping area within ten feet to the bedrooms. Where a fuel burning appliance is located within a bedroom or its attached bathroom, a carbon monoxide alarm shall be installed within the bedroom. At least one alarm shall be installed on each story of a dwelling unit, including basements and cellars but not in crawl spaces and uninhabitable attics.

LIFE SAFETY LEGEND

	EXIT LOCATION
	EXTERIOR EXIT DOOR
	LENGTH OF TRAVEL - EGRESS
	SMOKE DETECTOR
	SMOKE DETECTOR & CARBON MONOXIDE COMBO
	EGRESS WINDOW AT LEAST ONE SHALL COMPLY @ EACH BEDROOM IF NOT ALL
	TEMPERED GLASS LOCATION AS PE CODE
	HEAT DETECTOR

PROJECT SPECIFIC NOTES

- (A) 1 HOUR RATED SEPARATION PER IBC 2015 TABLE 508.2.5

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1309 SASSAQUIN AVE - COMPLETE RENO

1309 SASSAQUIN AVENUE,
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GENERAL CONTRACTOR:

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TEL: 508-221-0177

REVISION:

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1	09.29.2022	PERMIT SET

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LIFE SAFETY PLAN

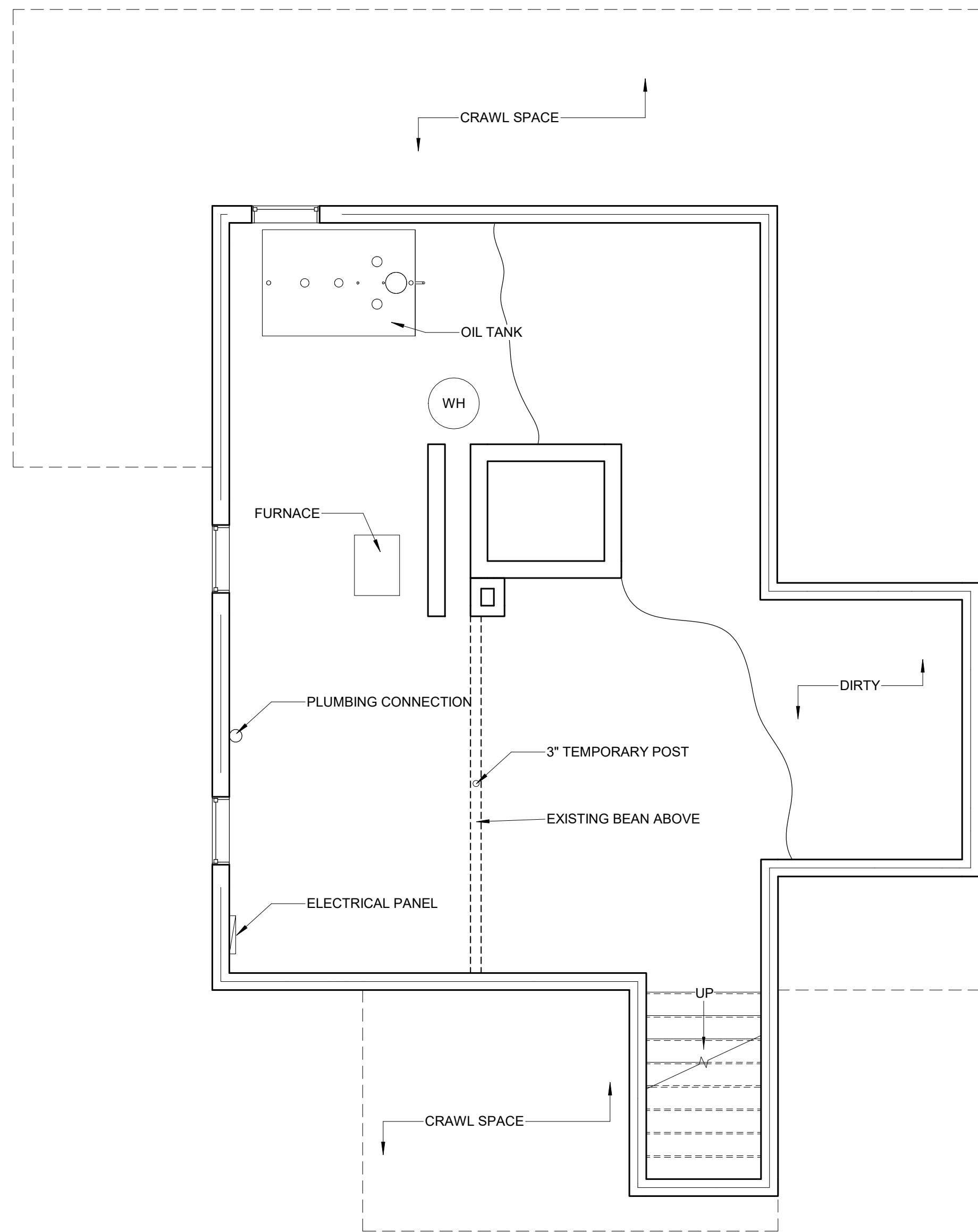
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DATE: 09.29.2022
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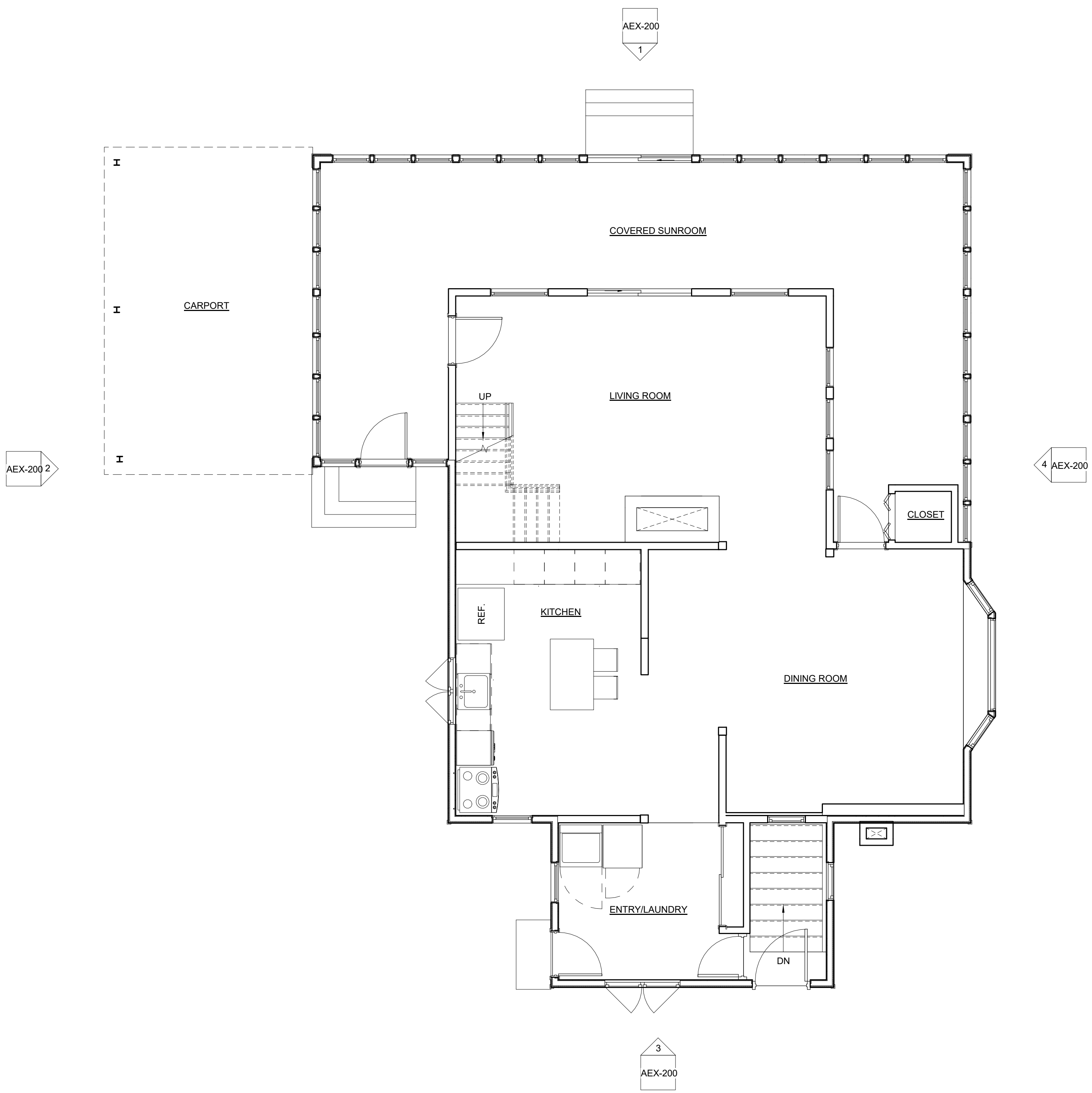
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PROJECT LOCATION:
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① EXISTING BASEMENT FLOOR PLAN
1/4" = 1'-0"



② EXISTING FIRST FLOOR PLAN
1/4" = 1'-0"

PARTITION
EXISTING WALL, VERIFY
CONSTRUCTION IN FIELD

EXISTING CONDITIONS
GENERAL NOTES
IT IS THE RESPONSIBILITY OF THE
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**EXISTING FLOOR
PLANS**

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SCALE:

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DATE:

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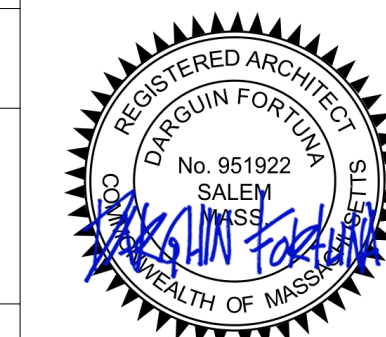
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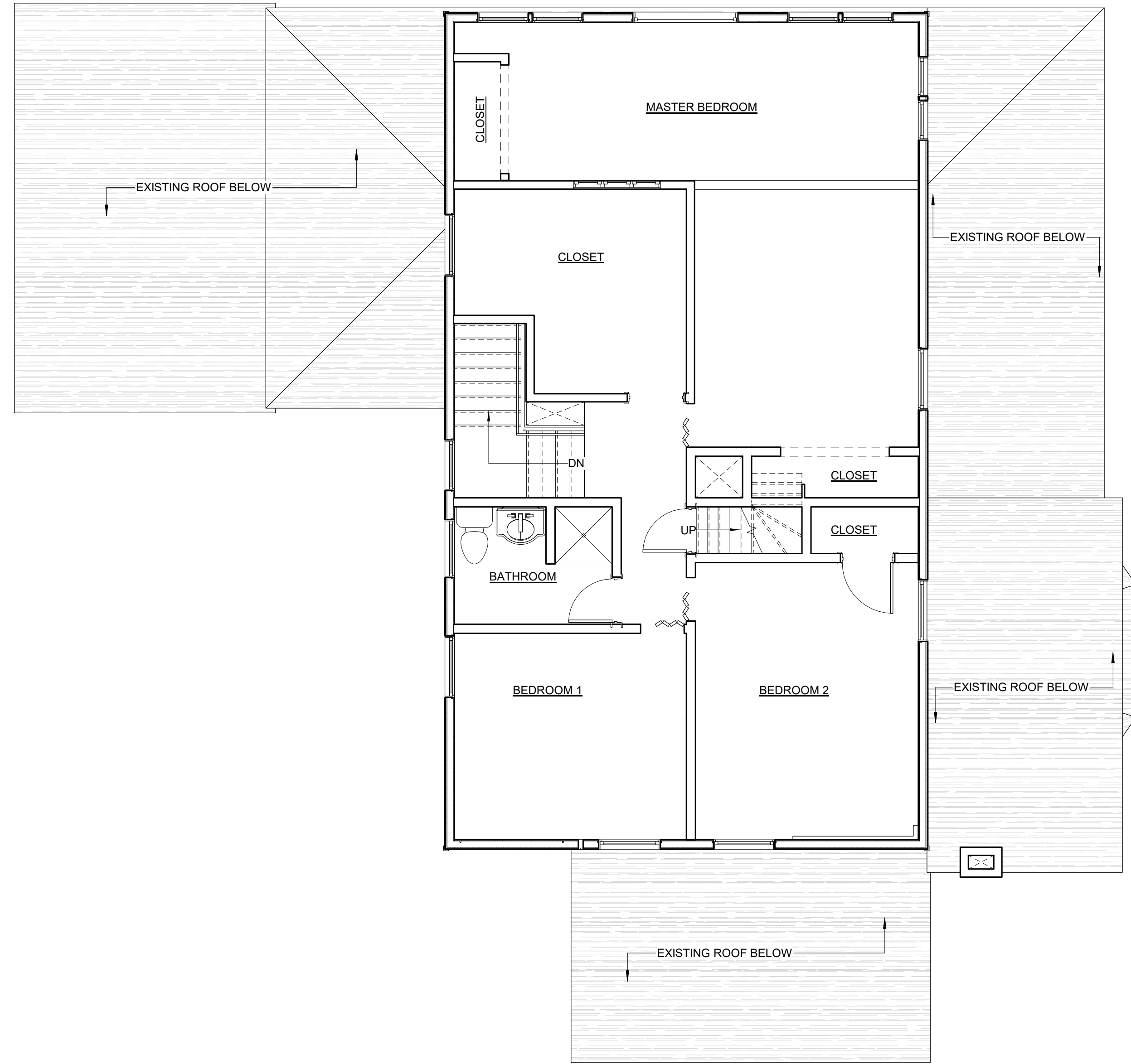
PARTITION
EXISTING WALL, VERIFY CONSTRUCTION IN FIELD

**EXISTING CONDITIONS
GENERAL NOTES**

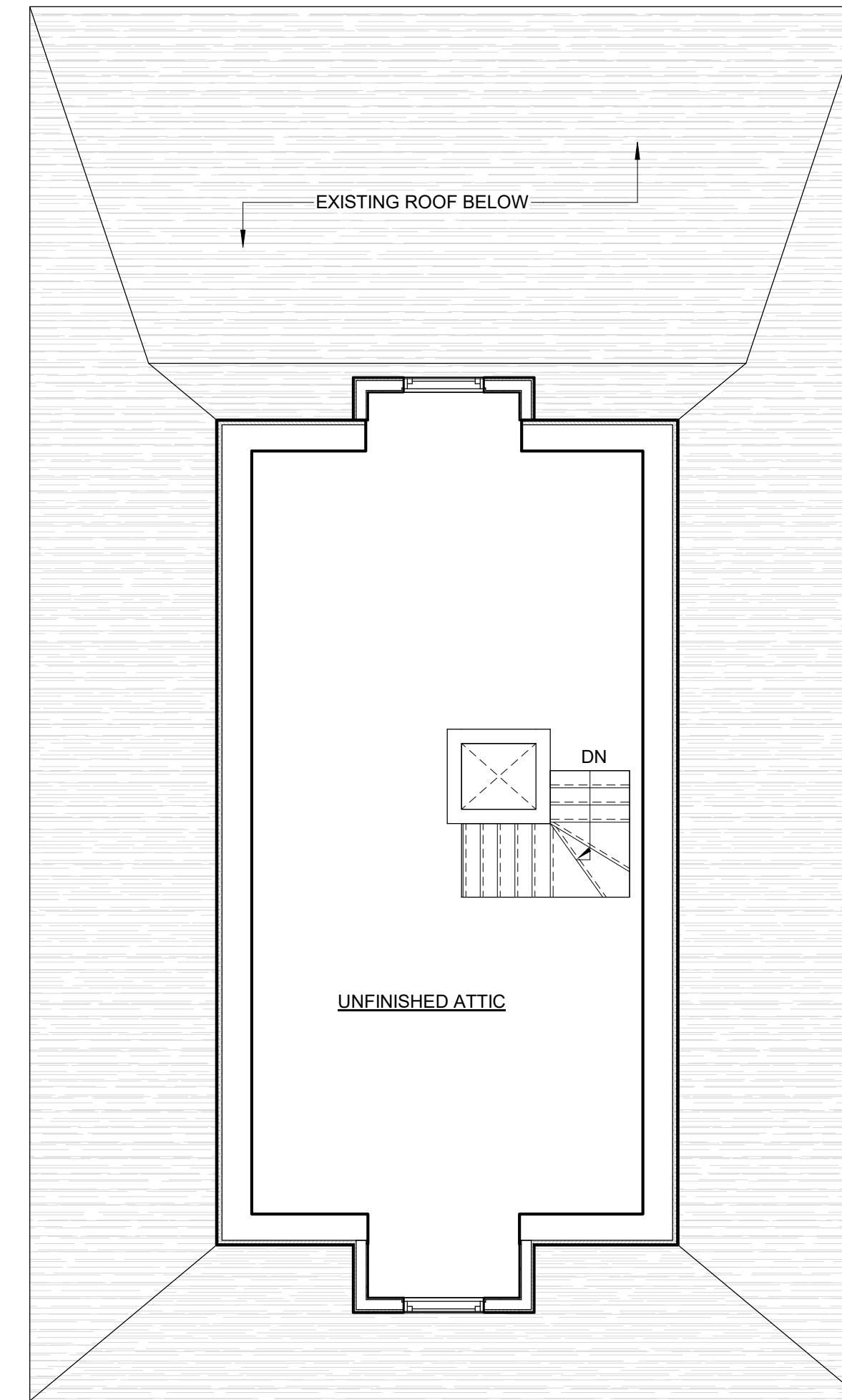
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① EXISTING SECOND FLOOR PLAN
1/4" = 1'-0"



② EXISTING THIRD FLOOR PLAN
1/4" = 1'-0"

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1	09.29.2022	PERMIT SET

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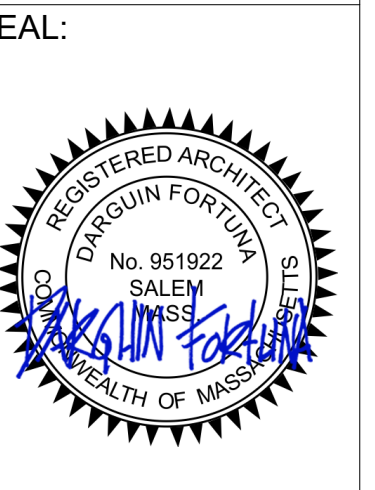
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DATE:
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PROJECT NO.:
22270



DRAWING NO.:
AEX-101

PARTITION
EXISTING WALL, VERIFY CONSTRUCTION IN FIELD

EXISTING CONDITIONS
GENERAL NOTES
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NO:	DATE:	DESCRIPTION:
1	09.29.2022	PERMIT SET

DRAWING TITLE:
EXISTING ELEVATIONS

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CHECKED BY: MS	
SCALE: As indicated	
DATE: 09.29.2022	
PROJECT NO.: 22270	

DRAWING NO.:
AEX-200

PROJECT LOCATION:
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① EXISTING EAST ELEVATION
 1/4" = 1'-0"



② EXISTING NORTH ELEVATION
 1/4" = 1'-0"



③ EXISTING WEST ELEVATION
 1/4" = 1'-0"



④ EXISTING SOUTH ELEVATION
 1/4" = 1'-0"

ROOF LEVEL
 25' - 5 3/4"

THIRD LEVEL
 17' - 0 3/4"

SECOND LEVEL
 9' - 7 3/4"

FIRST LEVEL
 1' - 8 1/8"

GROUND LEVEL
 0' - 0"




ROOF LEVEL
 25' - 5 3/4"

THIRD LEVEL
 17' - 0 3/4"

SECOND LEVEL
 9' - 7 3/4"

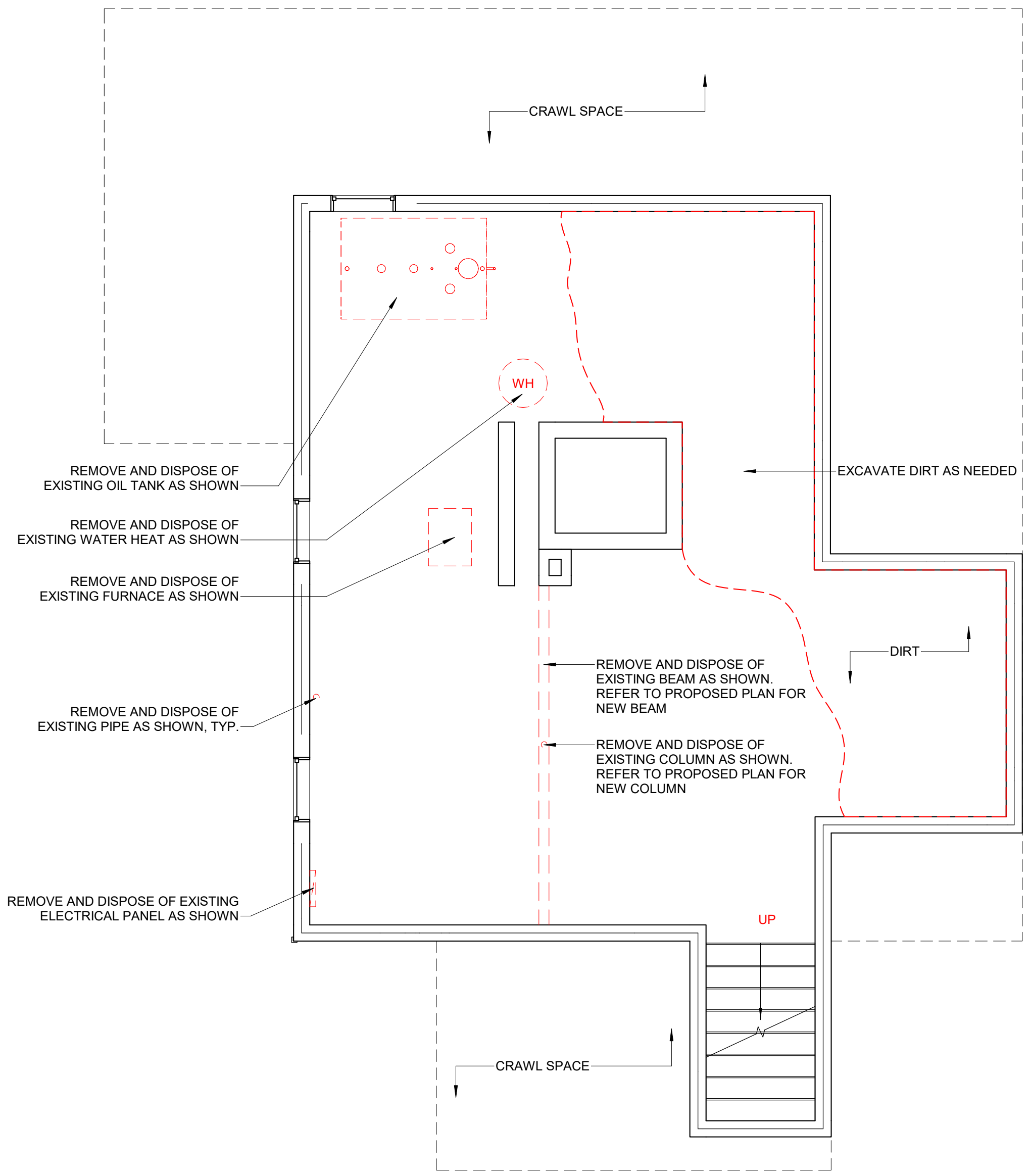
FIRST LEVEL
 1' - 8 1/8"

GROUND LEVEL
 0' - 0"

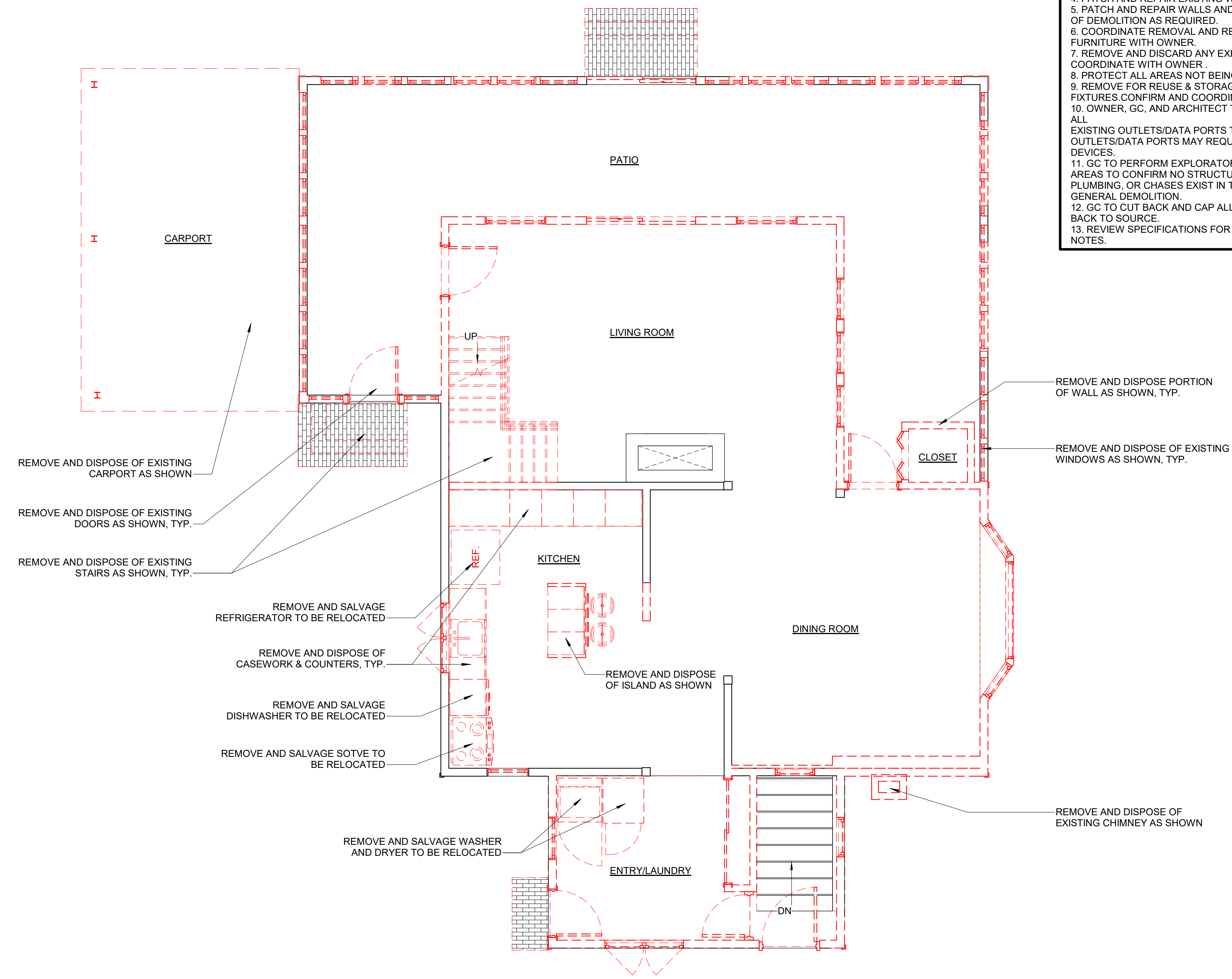
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	EXISTING TO BE REMOVED
	EXISTING TO REMAIN

- GENERAL NOTES:**
1. ALL INTERIOR DIMENSIONS ARE TO INTERIOR FACE OF GWB. U.N.O.
 2. PROVIDE BLOCKING AT ALL WALLS W/ WALL MOUNTED FIXTURES AND ACCESSORIES. TYP.
 3. CONFIRM CEILING HEIGHTS IN FIELD.

- GENERAL DEMOLITION NOTES:**
1. REMOVE AND DISPOSE EXISTING INTERIOR PARTITIONS AS INDICATED ON THE PLAN.
 2. REMOVE AND DISCARD EXISTING INTERIOR DOORS AND FRAMES AS INDICATED ON THE PLAN.
 3. PATCH AND MATH CEILINGS AS NEEDED. CONFIRM AND COORDINATE WITH OWNER.
 4. PATCH AND REPAIR EXISTING WALLS TO REMAIN AS REQUIRED.
 5. PATCH AND REPAIR WALLS AND FINISHED ADJACENT TO AREAS OF DEMOLITION AS REQUIRED.
 6. COORDINATE REMOVAL AND RELOCATION OF EXISTING FURNITURE WITH OWNER.
 7. REMOVE AND DISCARD ANY EXISTING MILLWORK. CONFIRM AND COORDINATE WITH OWNER.
 8. PROTECT ALL AREAS NOT BEING AFFECTED BY DEMOLITION.
 9. REMOVE FOR REUSE & STORAGE ALL EXISTING LIGHT FIXTURES CONFIRM AND COORDINATE WITH OWNER.
 10. OWNER, GC, AND ARCHITECT TO WALK THROUGH AND MARK ALL EXISTING OUTLETS/DATA PORTS TO REMAIN. THESE OUTLETS/DATA PORTS MAY REQUIRE NEW PLATES AND/OR DEVICES.
 11. GC TO PERFORM EXPLORATORY PROBES AT THICKENED WALL AREAS TO CONFIRM NO STRUCTURAL COLUMNS, DUCTS, PLUMBING, OR CHASES EXIST IN THESE CAVITIES PRIOR TO GENERAL DEMOLITION.
 12. GC TO CUT BACK AND CAP ALL UNUSED WATER SUPPLY LINES BACK TO SOURCE.
 13. REVIEW SPECIFICATIONS FOR ADDITIONAL DEMOLITION NOTES.



① DEMO BASEMENT FLOOR PLAN
1/4" = 1'-0"



② DEMO FIRST FLOOR PLAN
1/4" = 1'-0"

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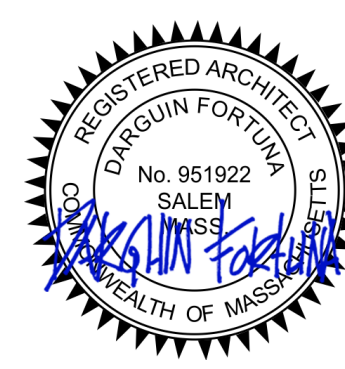
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PROJECT NO.: 22270	

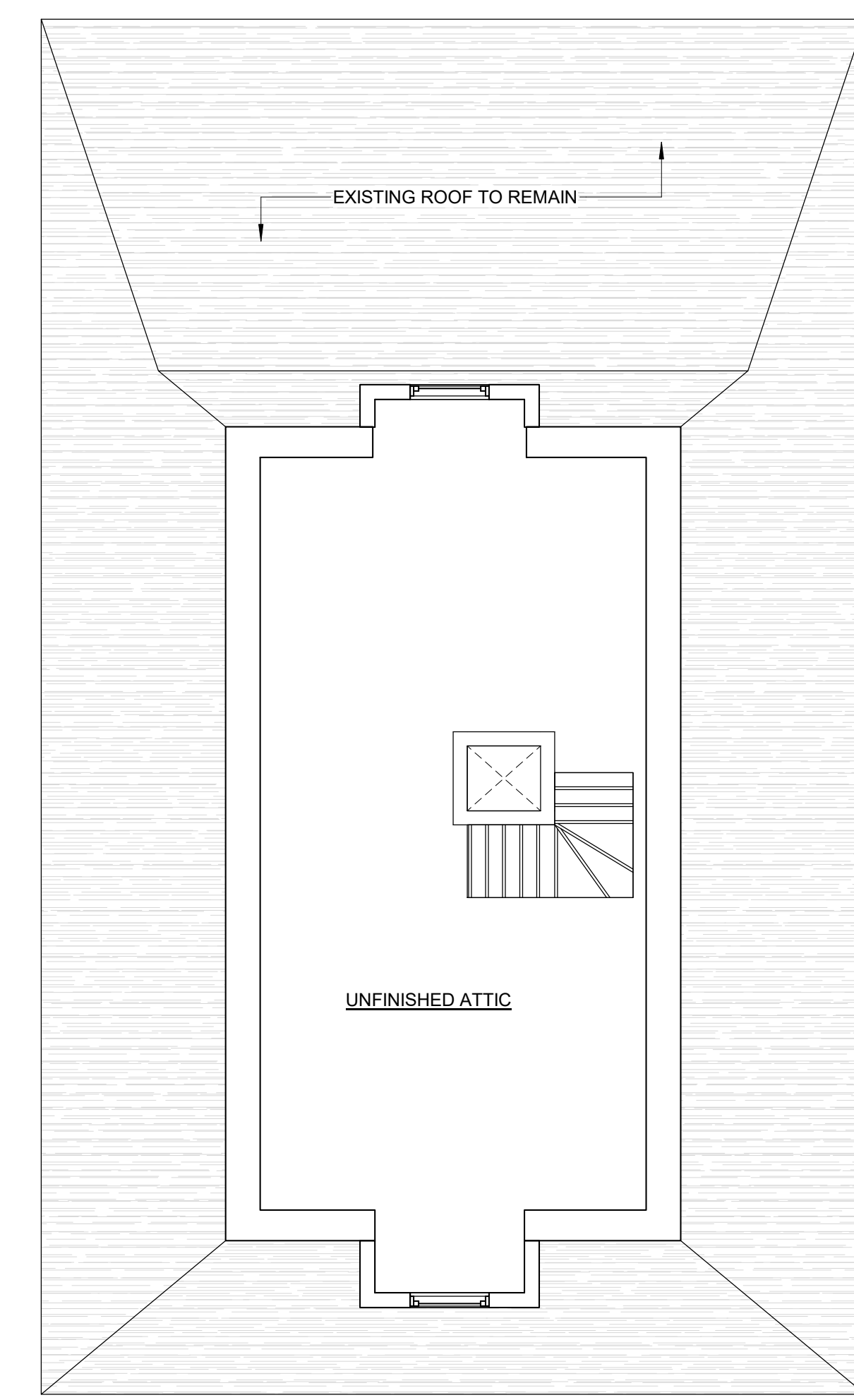
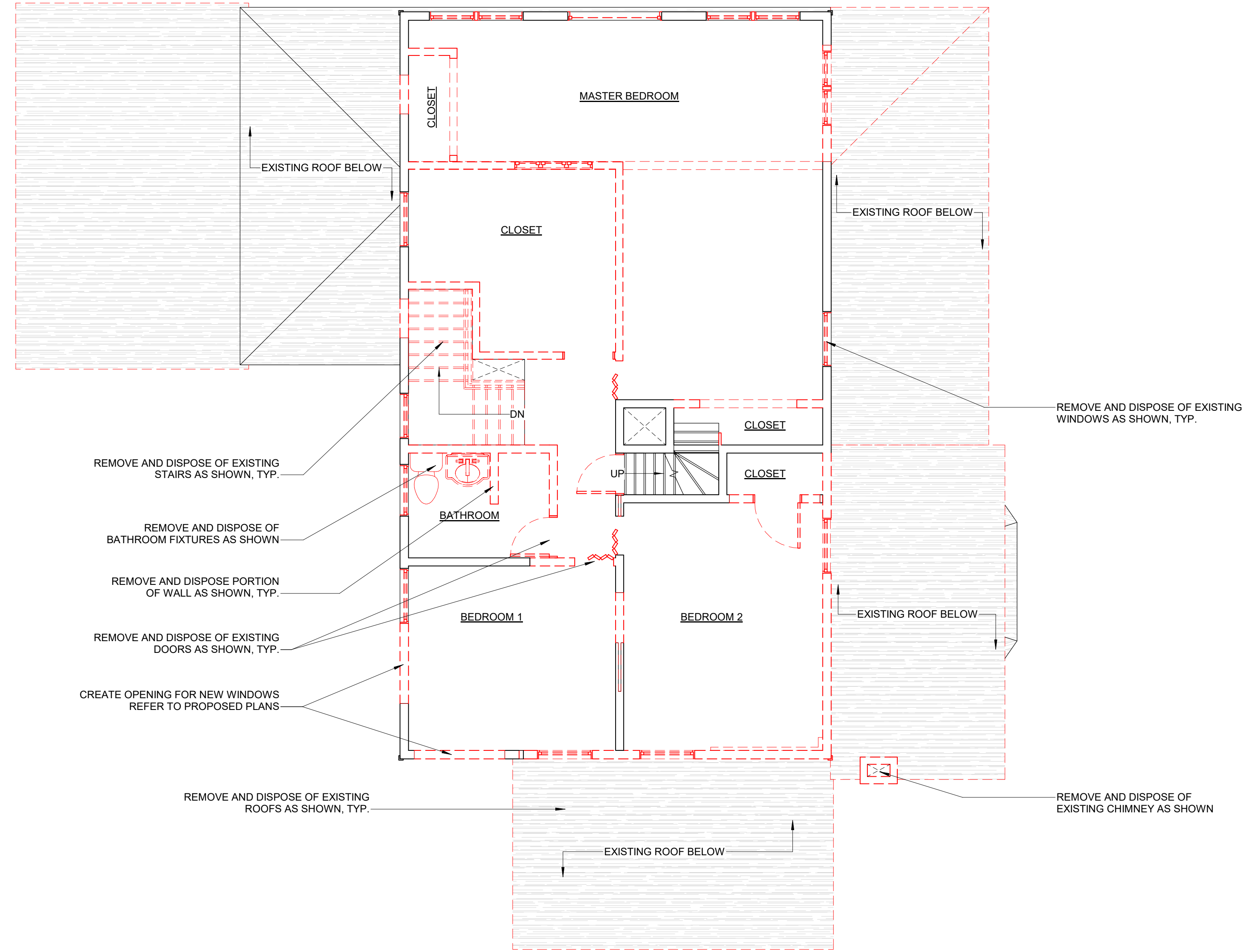
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EXISTING TO BE REMOVED	
	ITEM TO BE REMOVED
	EXISTING TO BE REMOVED
	EXISTING TO REMAIN

- GENERAL NOTES:**
1. ALL INTERIOR DIMENSIONS ARE TO INTERIOR FACE OF G.W.B. U.N.O.
 2. PROVIDE BLOCKING AT ALL WALLS W/ WALL MOUNTED FIXTURES AND ACCESSORIES, TYP.
 3. CONFIRM CEILING HEIGHTS IN FIELD.

- GENERAL DEMOLITION NOTES:**
1. REMOVE AND DISPOSE EXISTING INTERIOR PARTITIONS AS INDICATED ON THE PLAN
 2. REMOVE AND DISCARD EXISTING INTERIOR DOORS AND FRAMES AS INDICATED ON THE PLAN.
 3. PATCH AND MATH CEILINGS AS NEEDED. CONFIRM AND COORDINATE WITH OWNER.
 4. PATCH AND REPAIR EXISTING WALLS TO REMAIN AS REQUIRED.
 5. PATCH AND REPAIR WALLS AND FINISHED ADJACENT TO AREAS OF DEMOLITION AS REQUIRED.
 6. COORDINATE REMOVAL AND RELOCATION OF EXISTING FURNITURE WITH OWNER.
 7. REMOVE AND DISCARD ANY EXISTING MILLWORK. CONFIRM AND COORDINATE WITH OWNER.
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 10. OWNER, GC, AND ARCHITECT TO WALK THROUGH AND MARK ALL EXISTING OUTLETS/DATA PORTS TO REMAIN. THESE OUTLETS/DATA PORTS MAY REQUIRE NEW PLATES AND/OR DEVICES.
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 12. GO TO CUT BACK AND CAP ALL UNUSED WATER SUPPLY LINES BACK TO SOURCE.
 13. REVIEW SPECIFICATIONS FOR ADDITIONAL DEMOLITION NOTES.



1 DEMO SECOND FLOOR PLAN
1/4" = 1'-0"

2 DEMO THIRD FLOOR PLAN
1/4" = 1'-0"

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1	09.29.2022	PERMIT SET

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DEMO FLOOR PLANS

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PROJECT NO.: 22270	

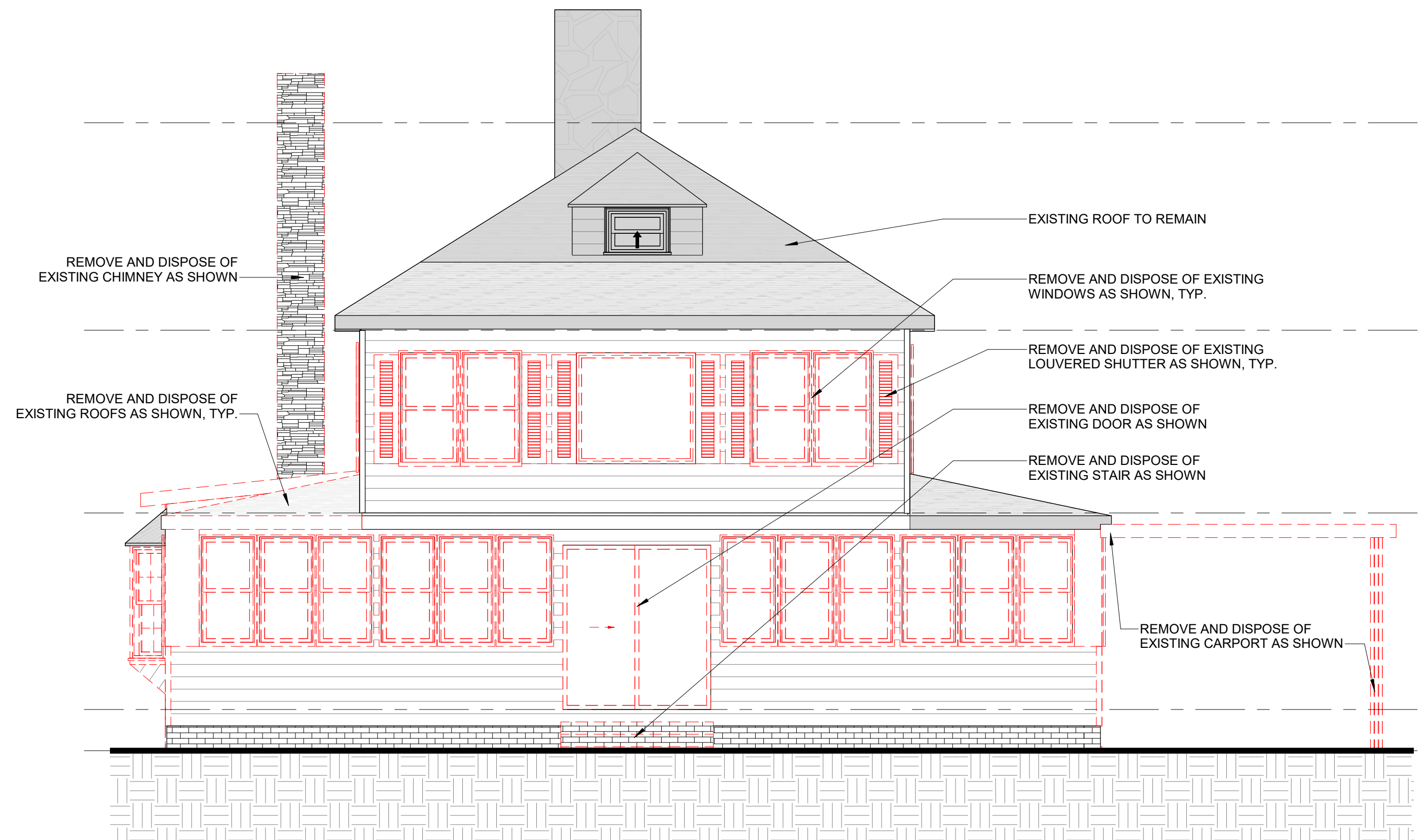
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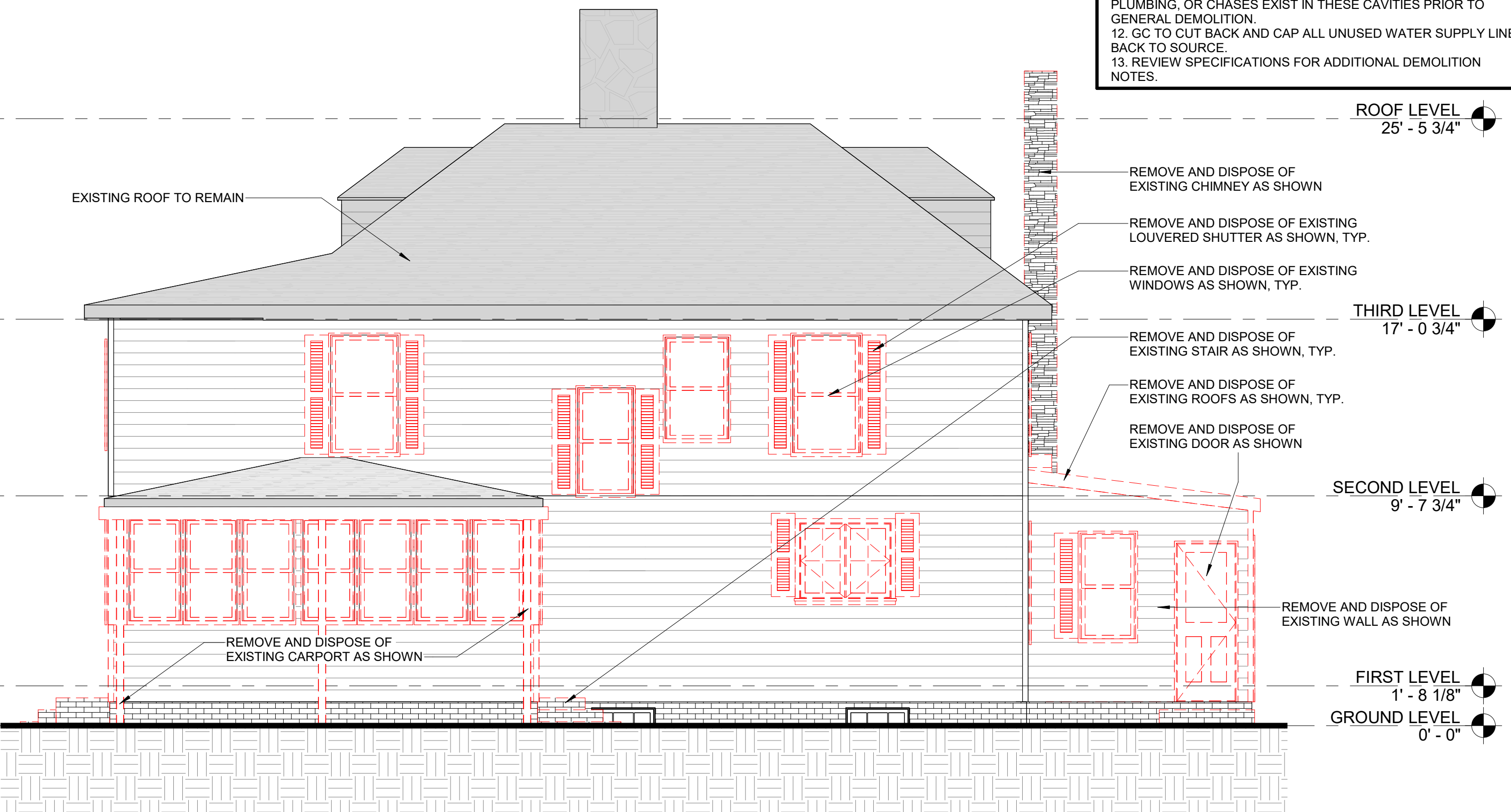
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3. CONFIRM CEILING HEIGHTS IN FIELD.

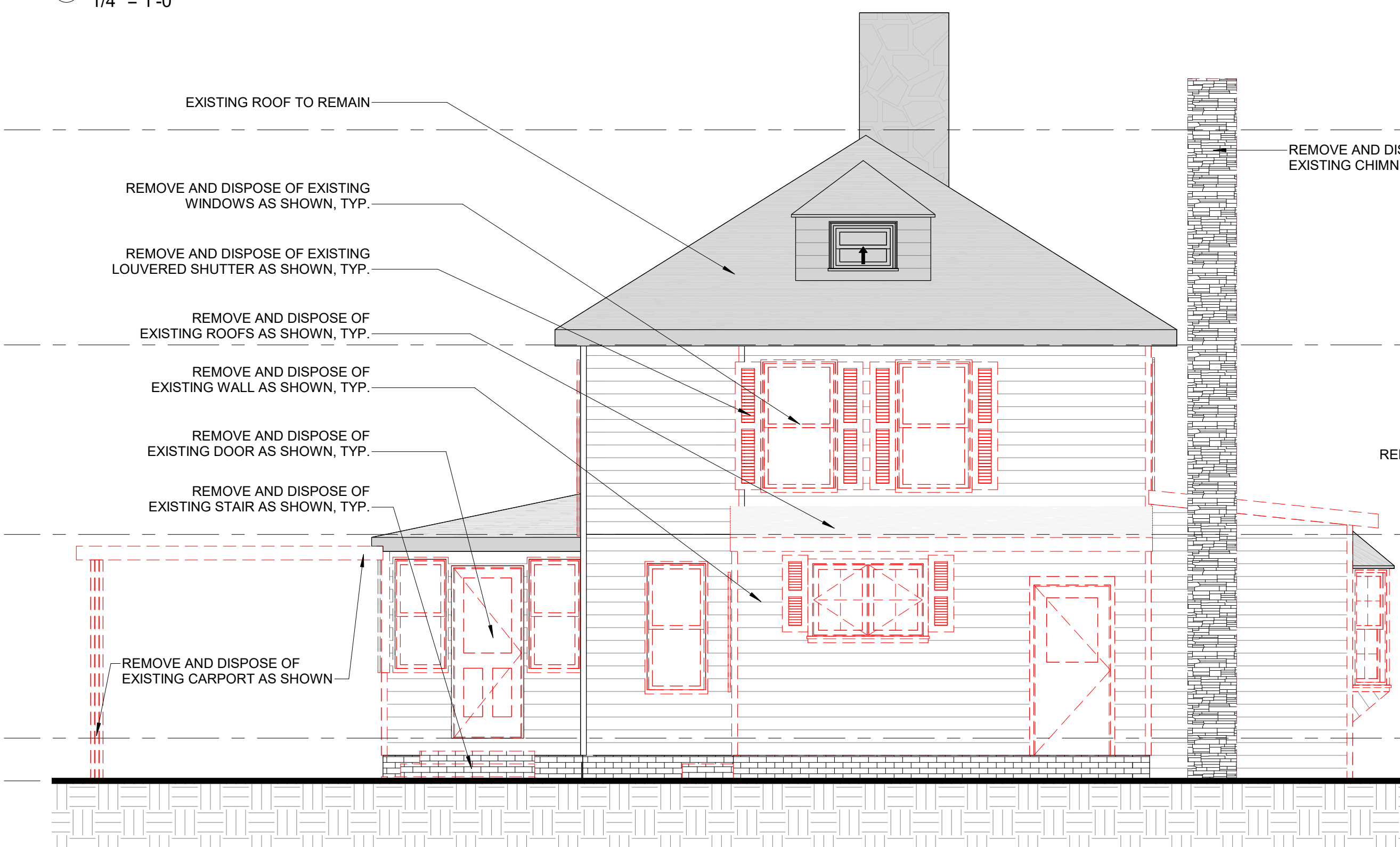
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 9. REMOVE FOR REUSE & STORAGE ALL EXISTING LIGHT FIXTURES. CONFIRM AND COORDINATE WITH OWNER.
 10. OWNER, GC, AND ARCHITECT TO WALK THROUGH AND MARK ALL EXISTING OUTLETS/DATA PORTS TO REMAIN. THESE OUTLETS/DATA PORTS MAY REQUIRE NEW PLATES AND/OR DEVICES.
 11. GO TO PERFORM EXPLORATORY PROBES AT THICKENED WALL AREAS TO CONFIRM NO STRUCTURAL COLUMNS, DUCTS, PLUMBING, OR CHASES EXIST IN THESE CAVITIES PRIOR TO GENERAL DEMOLITION.
 12. GO TO CUT BACK AND CAP ALL UNUSED WATER SUPPLY LINES BACK TO SOURCE.
 13. REVIEW SPECIFICATIONS FOR ADDITIONAL DEMOLITION NOTES.



1 DEMO EAST ELEVATION
1/4" = 1'-0"



2 DEMO NORTH ELEVATION
1/4" = 1'-0"



3 DEMO WEST ELEVATION
1/4" = 1'-0"



4 DEMO SOUTH ELEVATION
1/4" = 1'-0"

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1309 SASSAQUIN AVE - COMPLETE RENO

1309 SASSAQUIN AVENUE,
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GENERAL CONTRACTOR:
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38 LAKE DRIVE,
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TEL: 508-221-0177

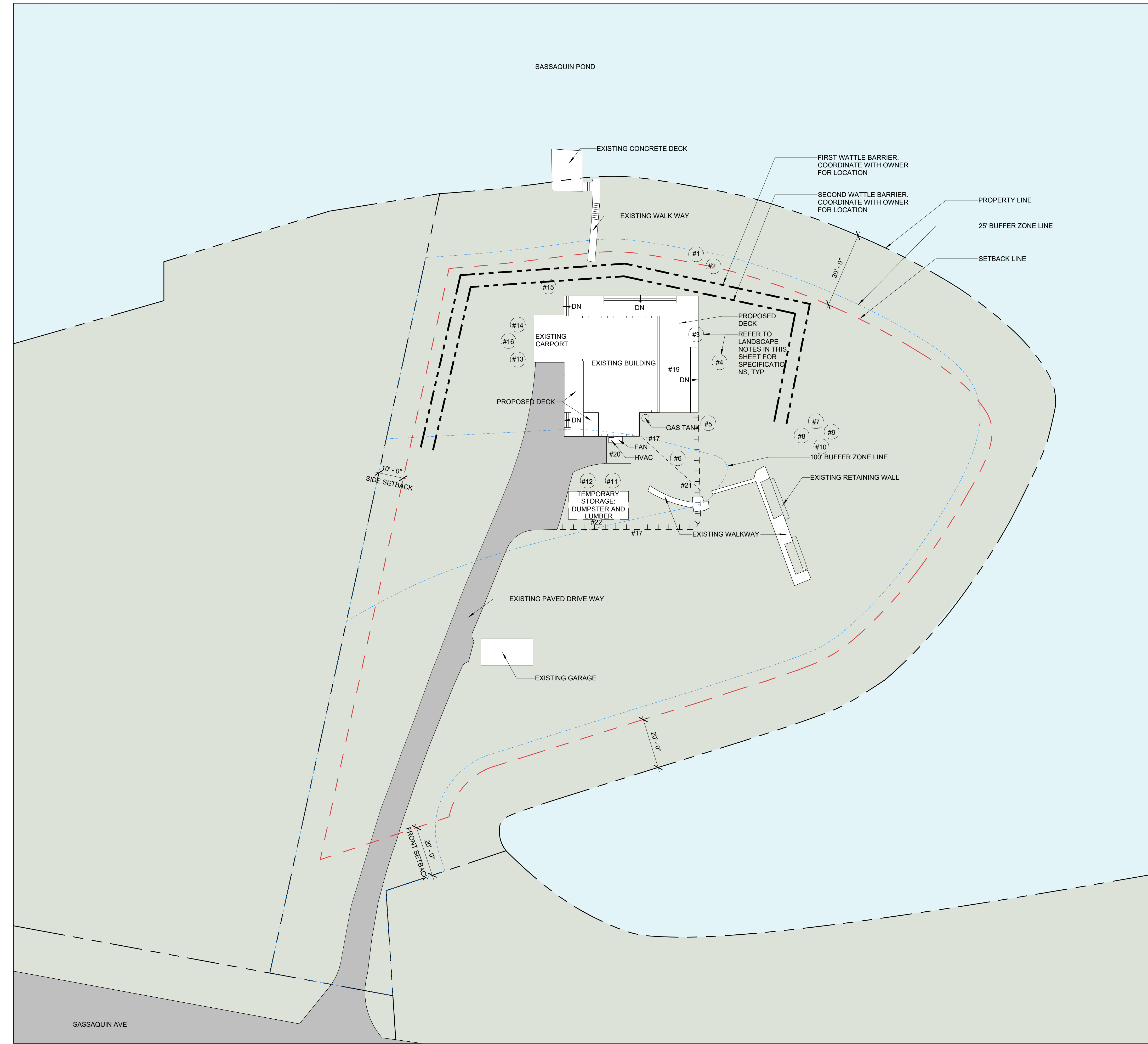
REVISION:

NO:	DATE:	DESCRIPTION:
1	09.29.2022	PERMIT SET

DRAWING TITLE:
DEMO ELEVATIONS

DRAWN BY: GL	SEAL:
CHECKED BY: MS	
SCALE: As indicated	
DATE: 09.29.2022	
PROJECT NO.: 22270	DRAWING NO.:
AD-200	

PROJECT LOCATION:
Y:\Flow\Projects\Architecture\2022\22270 1309 SASSAQUIN AVE, NEW BEDFORD, MA - COMPLETE RENOVATION\Rev01\22270 1309 SASSAQUIN AVE_PERMIT SET.dwg



 North Project

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SURVEY INFORMATION BASED OF SURVEY PREPARED BY THOMPSON FARLAND

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GENERAL CONSTRUCTOR:

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TEL: 508-221-0177

- LANDSCAPE GENERAL NOTES**
- REMOVE TREES AS NEEDED. COORDINATE WITH OWNER FOR TOTAL AMOUNTS AND LOCATIONS.
 1. DEAD TREE - CUT TO 6FT.
 2. TREE REMAINS. PRUNE BRANCHES
 3. FUNGAL INFECTION TREE & STUMP TO BE REMOVED PREP AREA FOR NEW DECK
 4. TREE REMAINS. PRUNE BRANCHES
 5. TREE & STUMP NEXT TO CEMENT PIT TO BE REMOVED
 6. BUSH & TREE/ STUMP TO BE REMOVED
 7. HEAVILY LEANING OAK TREE & STUMP TO BE REMOVED
 8. TREE & STUMP TO BE REMOVED
 9. TREE & STUMP TO BE REMOVED
 10. TREE & STUMP TO BE REMOVED
 11. CUT EXISTING TREE TO 6 FEET
 12. CUT EXISTING TREE TO 6 FEET
 13. CUT EXISTING TREE TO 6 FEET. TREE SLABS TO BE CUT & DONATED FOR HISTORICAL USE EXAMINATION
 14. CUT EXISTING TREE TO 6 FEET.
 15. TREE REMAINS. PRUNE BRANCHES
 16. REMOVAL OF LEANING YOUNG DISEASED OAK TO CULTIVATE GROWTH OF HEMLOCKS
 17. AREA OF LOOSE PERMEABLE PAVING /PAVERS INSTALLED, EXTENDING THE DRIVEWAY
 18. HEMLOCKS ON PROPERTY TO BE TREATED
 19. REFER TO FRAMING PLANS FOR NUMBER OF FOOTINGS FOR NEW DECKS
 20. INSTALLED PADS/FOOTINGS UNDER HVAC & ABOVE GROUND GAS TANK
 21. 10 FEET PERFORATED PIPE FOR GUTTER RUNOFF PLACED IN GRAVEL/PERMEABLE PAVING
 22. TEMP STORAGE FOR DUMPSTER & LUMBER

- CONSTRUCTION GENERAL NOTES**
1. LINE INDICATES PLACEMENT OF FIRST AND SECONDARY WATTLE BARRIER ———
 2. EXCAVATED MATERIAL FROM BASEMENT WHEEL BARROWED OUT TO DUMP TRUCK AND REMOVED FROM PROPERTY
 3. EXCAVATED SONOTUBES MATERIAL PLACED ON TARP AND WRAPPED, NOT UNWRAPPED UNTIL SONOTUBES ARE BEING BACK FILLED

REVISION:		
NO.	DATE:	DESCRIPTION:
1	09.29.2022	PERMIT SET

DRAWING TITLE:

PROPOSED SITE PLAN

DRAWN BY:
GL

CHECKED BY:
MS

SCALE:
As indicated

DATE:
09.29.2022

PROJECT NO.:
22270

DRAWING NO.:
A-100

SEAL:



1 PROPOSED SITE PLAN
1" = 20'-0"

EXISTING & NEW WALLS	
	NEW WALL
	EXISTING TO REMAIN

GENERAL CONTRACTOR NOTES:

- CONTRACTOR SHALL VERIFY ALL DIMENSIONS IN FIELD.
- CONTRACTOR SHALL ADHERE TO ALL APPLICABLE CODES AND REGULATIONS.
- CONTRACTOR SHALL INFORM ARCHITECT OF ANY ERRORS OR DEVIATIONS PRIOR TO CONTINUING WORK.
- CONTRACTOR SHALL COORDINATE WITH EACH SUB-CONTRACTOR AND ENSURE TO MEET ALL CODE AND SAFETY REQUIREMENTS.

GENERAL NOTES:

- ALL INTERIOR DIMENSIONS ARE TO INTERIOR FACE OF GWB. U.N.O.
- PROVIDE BLOCKING AT ALL WALLS W/ WALL MOUNTED FIXTURES AND ACCESSORIES. TYP.
- CONFIRM CEILING HEIGHTS IN FIELD.

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REVISION:

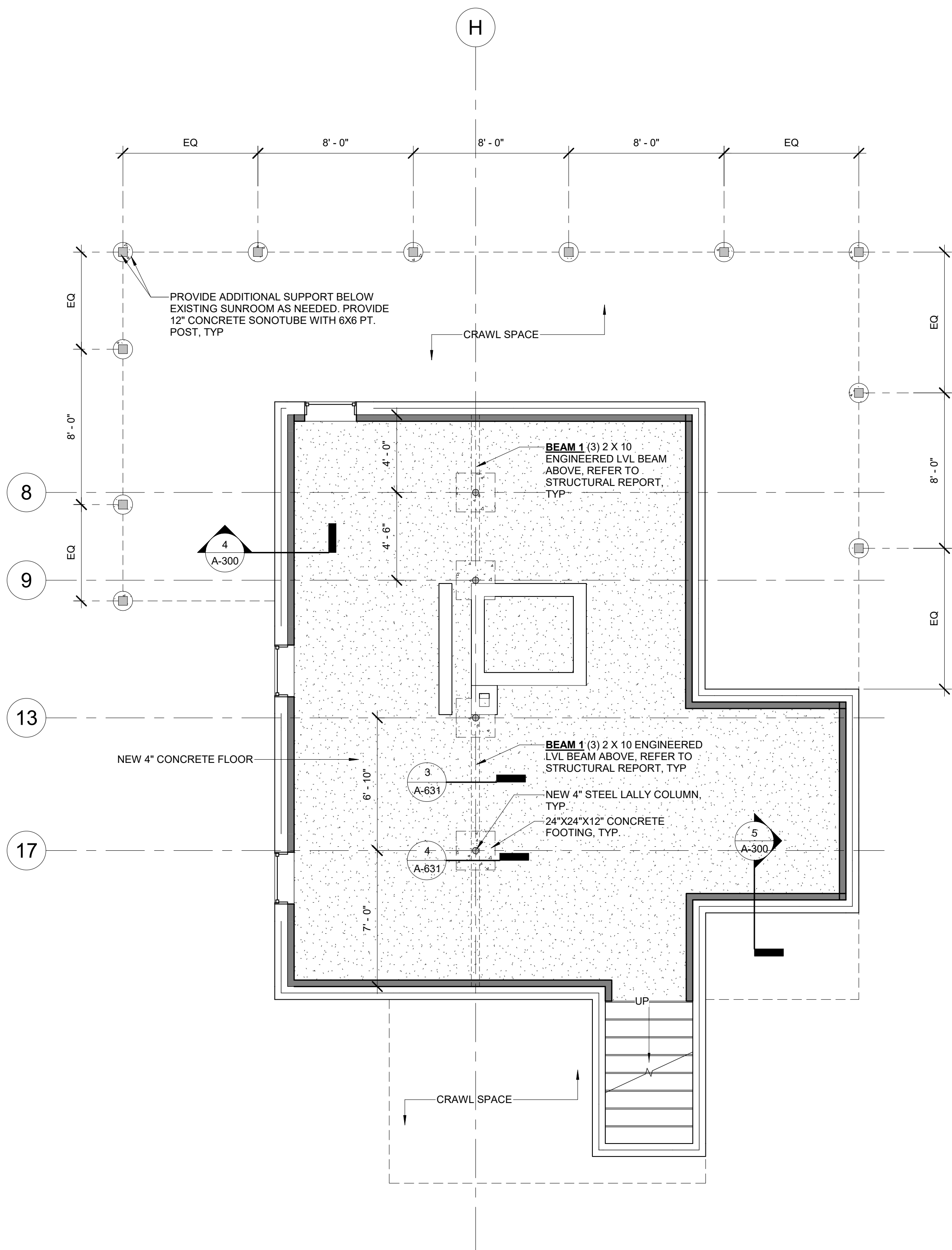
NO:	DATE:	DESCRIPTION:
1	09.29.2022	PERMIT SET

DRAWING TITLE:
PROPOSED FLOOR PLANS

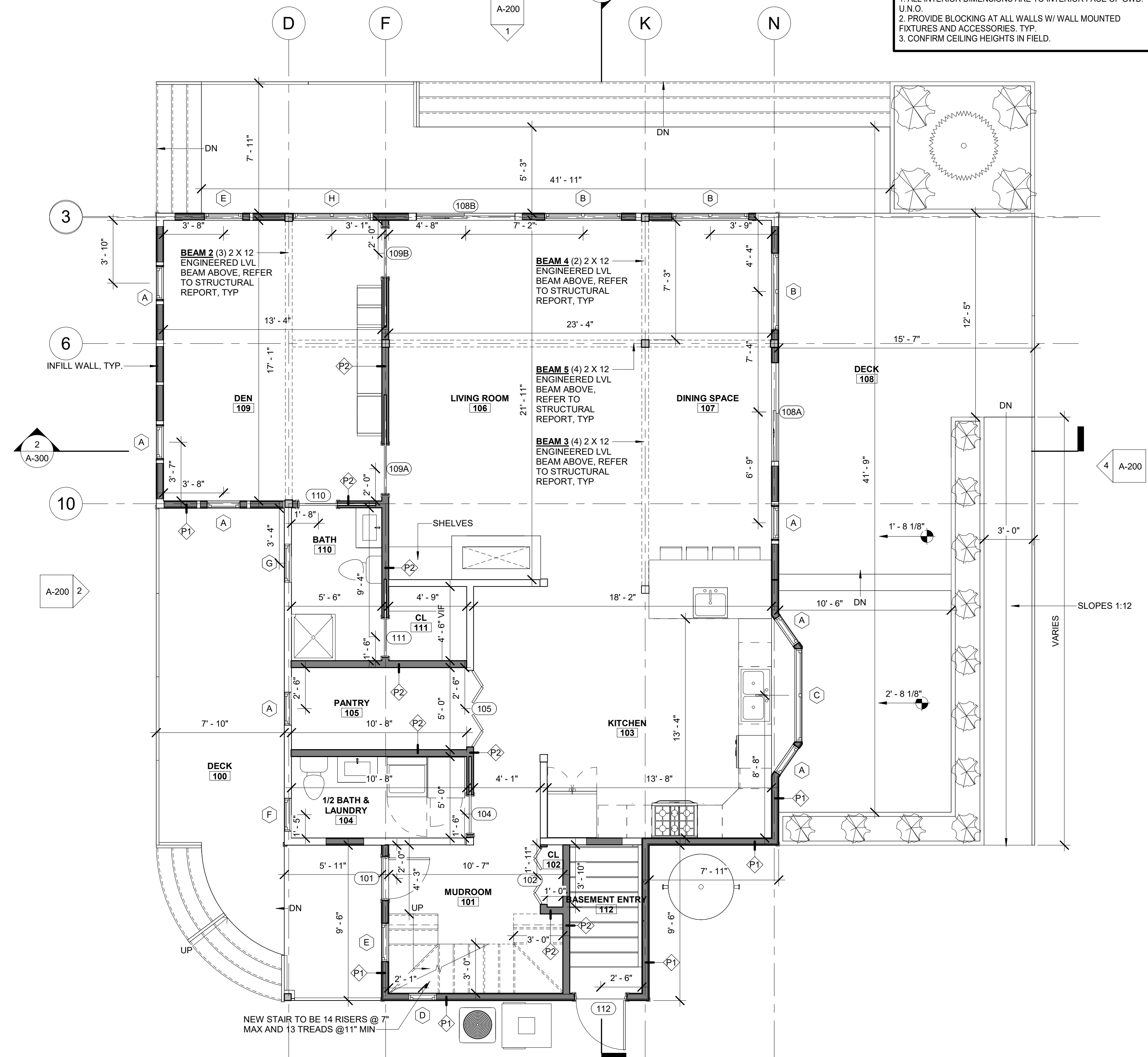
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SCALE: As indicated	
DATE: 09.29.2022	
PROJECT NO.: 22270	

DRAWING NO.:
A-101

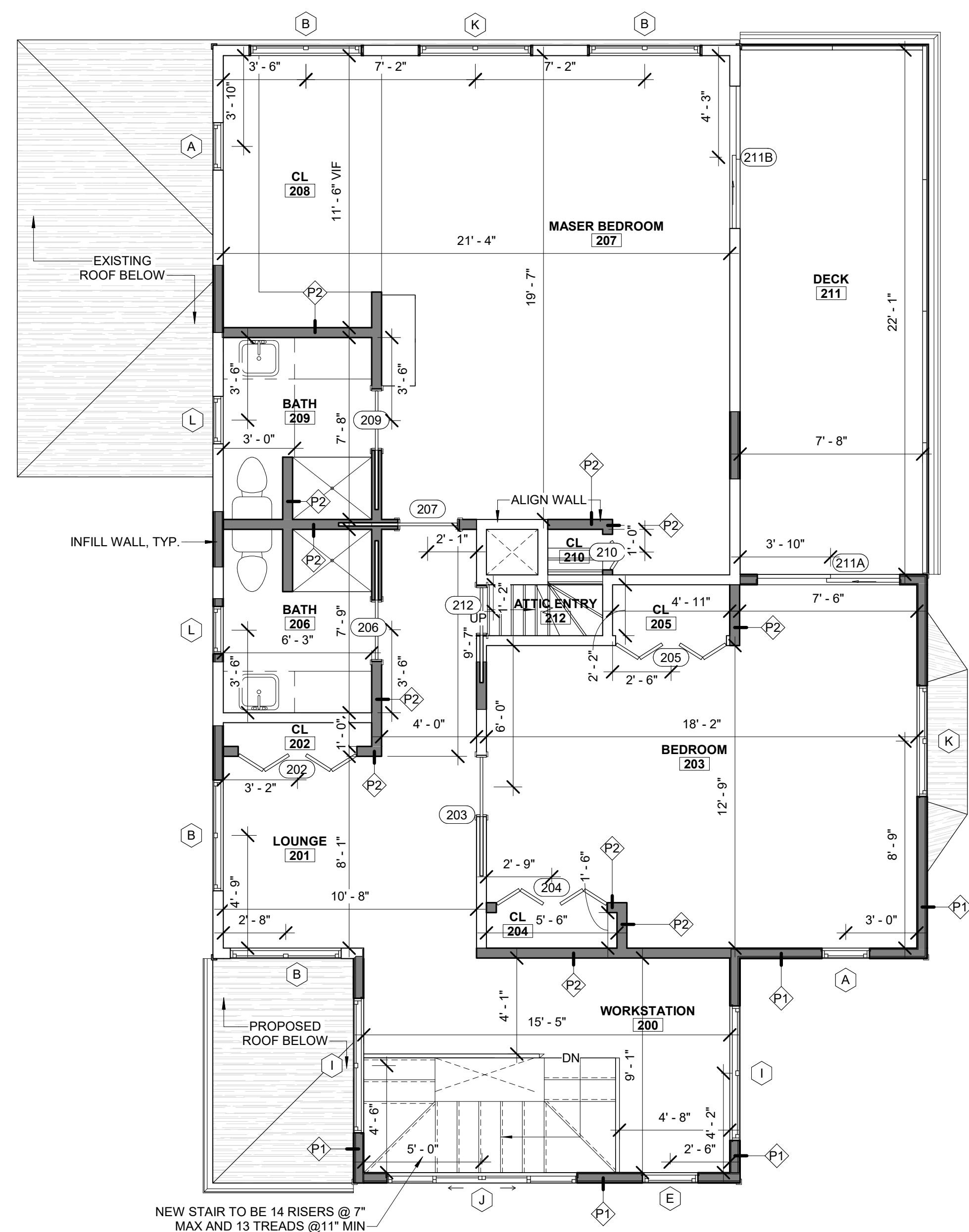
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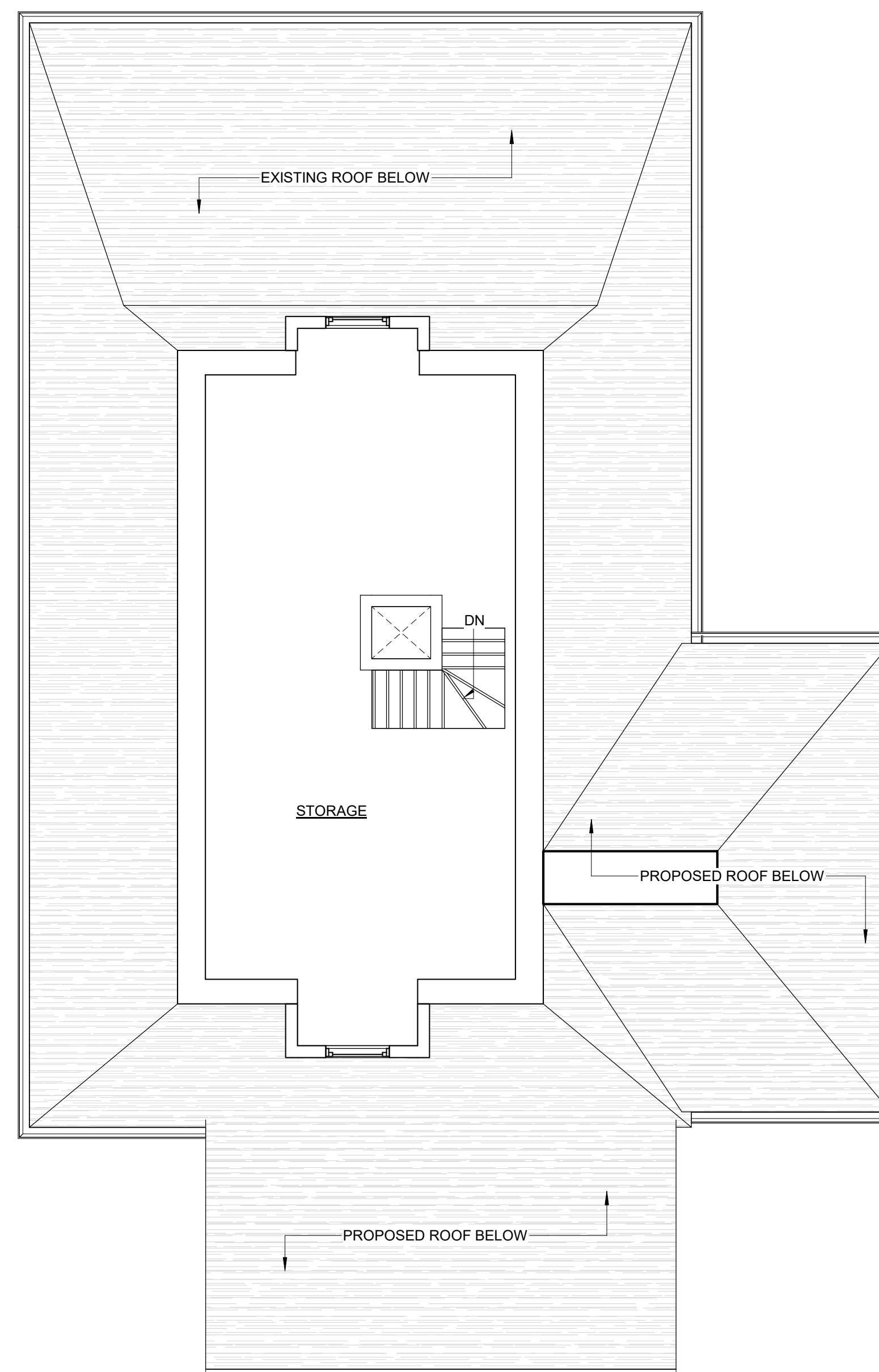
1 PROPOSED BASEMENT FLOOR PLAN
 1/4" = 1'-0"




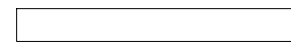
2 PROPOSED FIRST FLOOR PLAN
 1/4" = 1'-0"



1 PROPOSED SECOND FLOOR PLAN
1/4" = 1'-0"



2 PROPOSED THIRD FLOOR PLAN
1/4" = 1'-0"

EXISTING & NEW WALLS	
	NEW WALL
	EXISTING TO REMAIN

GENERAL CONTRACTOR NOTES:

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GENERAL NOTES:

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- CONFIRM CEILING HEIGHTS IN FIELD.

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1	09.29.2022	PERMIT SET

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PROPOSED FLOOR PLANS

DRAWN BY: GL	
CHECKED BY: MS	
SCALE: As indicated	
DATE: 09.29.2022	
PROJECT NO.: 22270	

DRAWING NO.:

A-102

PROJECT LOCATION:
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GENERAL NOTES:

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2. PROVIDE BLOCKING AT ALL WALLS W/ WALL MOUNTED FIXTURES AND ACCESSORIES. TYP.
3. CONFIRM CEILING HEIGHTS IN FIELD.

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REVISION:

NO:	DATE:	DESCRIPTION:
1	09.29.2022	PERMIT SET

DRAWING TITLE:
PROPOSED ROOF PLAN

DRAWN BY:
GL
CHECKED BY:
MS
SCALE:
As indicated
DATE:
09.29.2022
PROJECT NO.:
22270

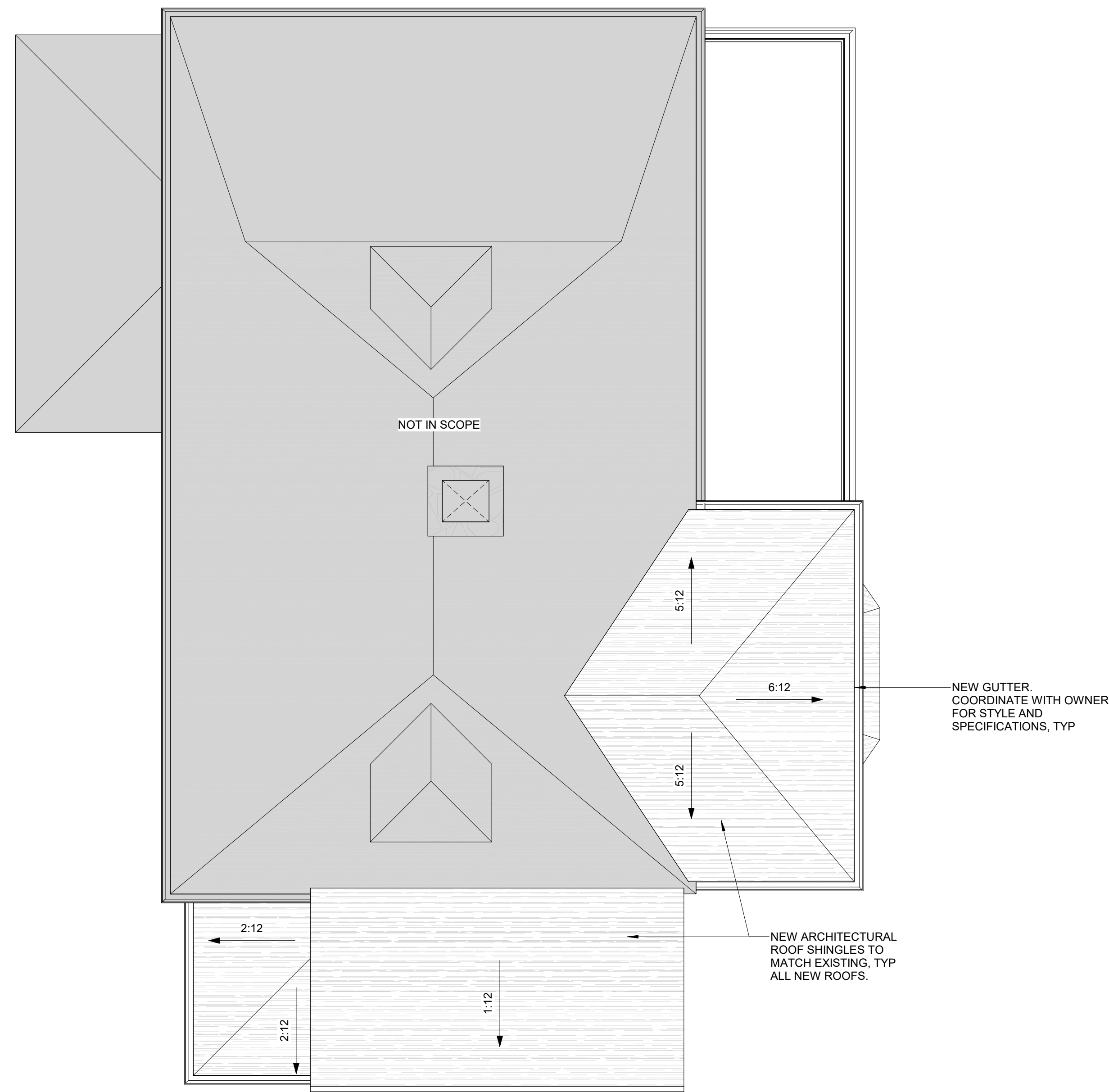
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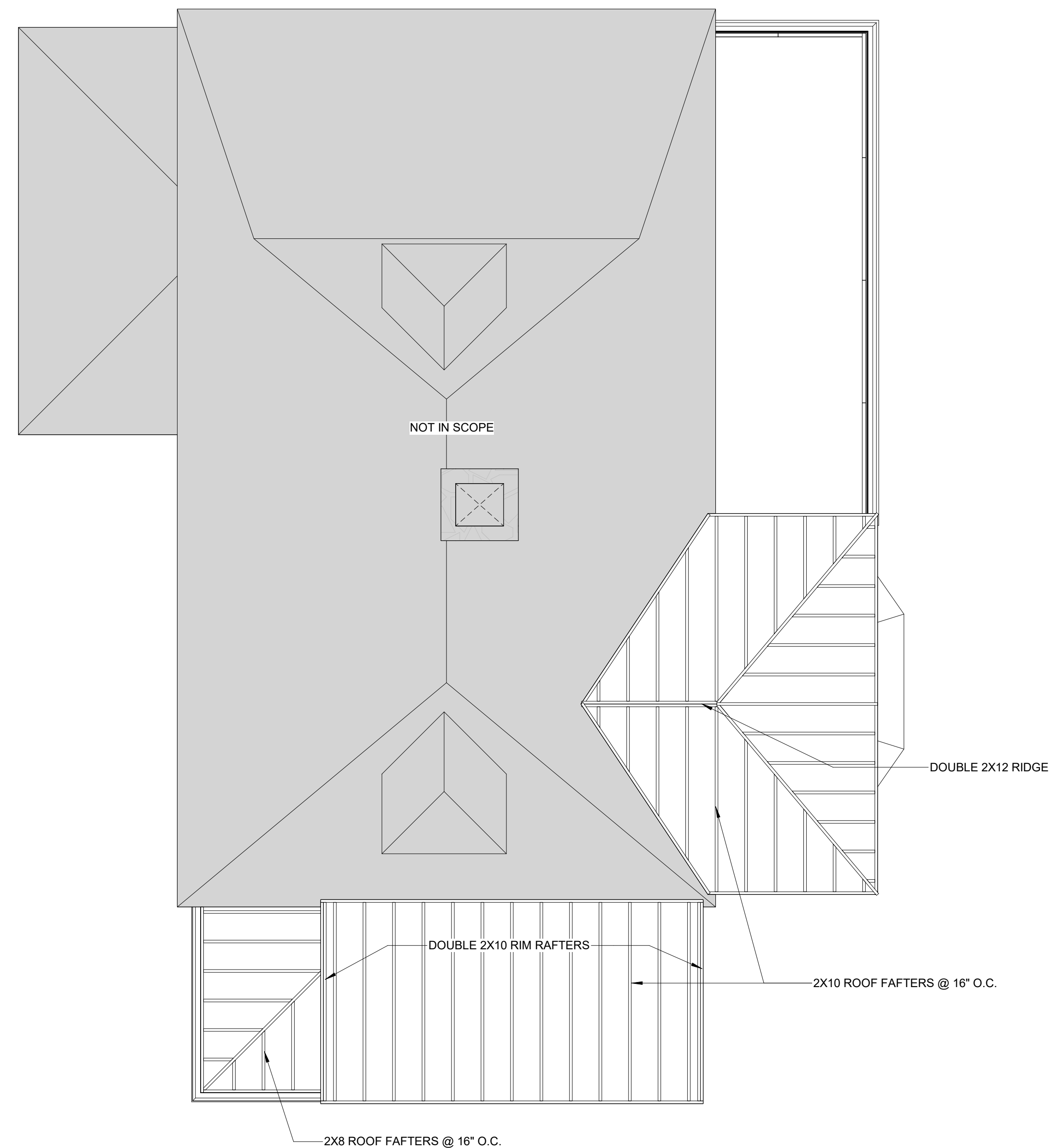
DRAWING NO.:

A-103

PROJECT LOCATION:
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1 PROPOSED ROOF PLAN
1/4" = 1'-0"



2 PROPOSED ROOF FRAMING PLAN
1/4" = 1'-0"

- GENERAL NOTES:**
1. ALL INTERIOR DIMENSIONS ARE TO INTERIOR FACE OF G.W.B. U.N.O.
 2. PROVIDE BLOCKING AT ALL WALLS W/ WALL MOUNTED FIXTURES AND ACCESSORIES. TYP.
 3. CONFIRM CEILING HEIGHTS IN FIELD.

EXISTING & NEW WALLS	
	NEW WALL
	EXISTING TO REMAIN

- GENERAL CONTRACTOR NOTES:**
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REVISION:

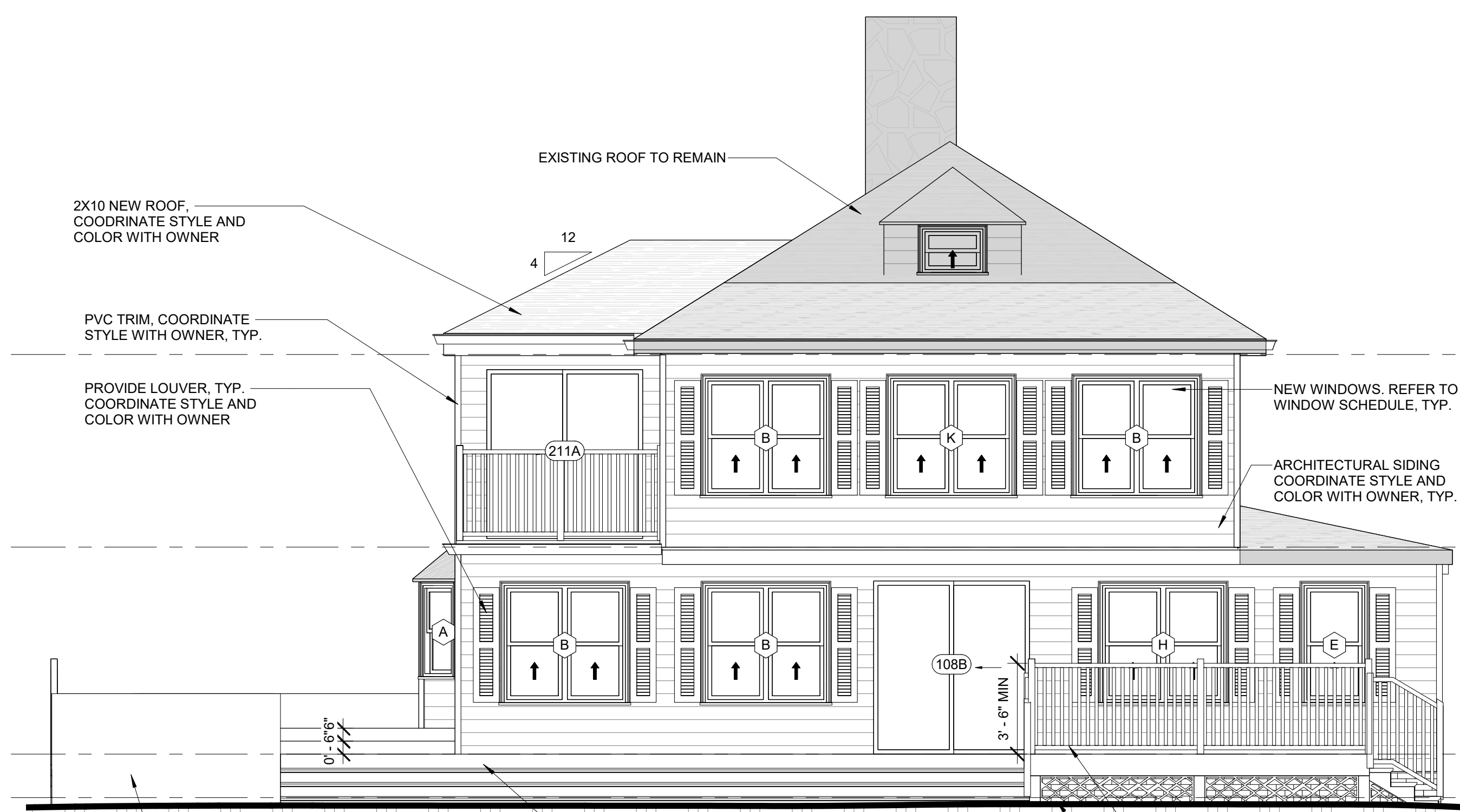
NO:	DATE:	DESCRIPTION:
1	09.29.2022	PERMIT SET

DRAWING TITLE: PROPOSED EXT. ELEVATIONS

DRAWN BY: GL	SEAL:
CHECKED BY: MS	
SCALE: As indicated	
DATE: 09.29.2022	
PROJECT NO.: 22270	

DRAWING NO.: A-200

PROJECT LOCATION:
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1 PROPOSED EAST ELEVATION
 1/4" = 1'-0"



2 PROPOSED NORTH ELEVATION
 1/4" = 1'-0"



3 PROPOSED WEST ELEVATION
 1/4" = 1'-0"



4 PROPOSED SOUTH ELEVATION
 1/4" = 1'-0"

- GENERAL NOTES:**
1. ALL INTERIOR DIMENSIONS ARE TO INTERIOR FACE OF GWB.
 2. PROVIDE BLOCKING AT ALL WALLS W/ WALL MOUNTED FIXTURES AND ACCESSORIES. TYP.
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REVISION:		
NO:	DATE:	DESCRIPTION:
1	09.29.2022	PERMIT SET

**DRAWING TITLE:
 BUILDING SECTIONS**

DRAWN BY:
 GL

CHECKED BY:
 MS

SCALE:
 As indicated

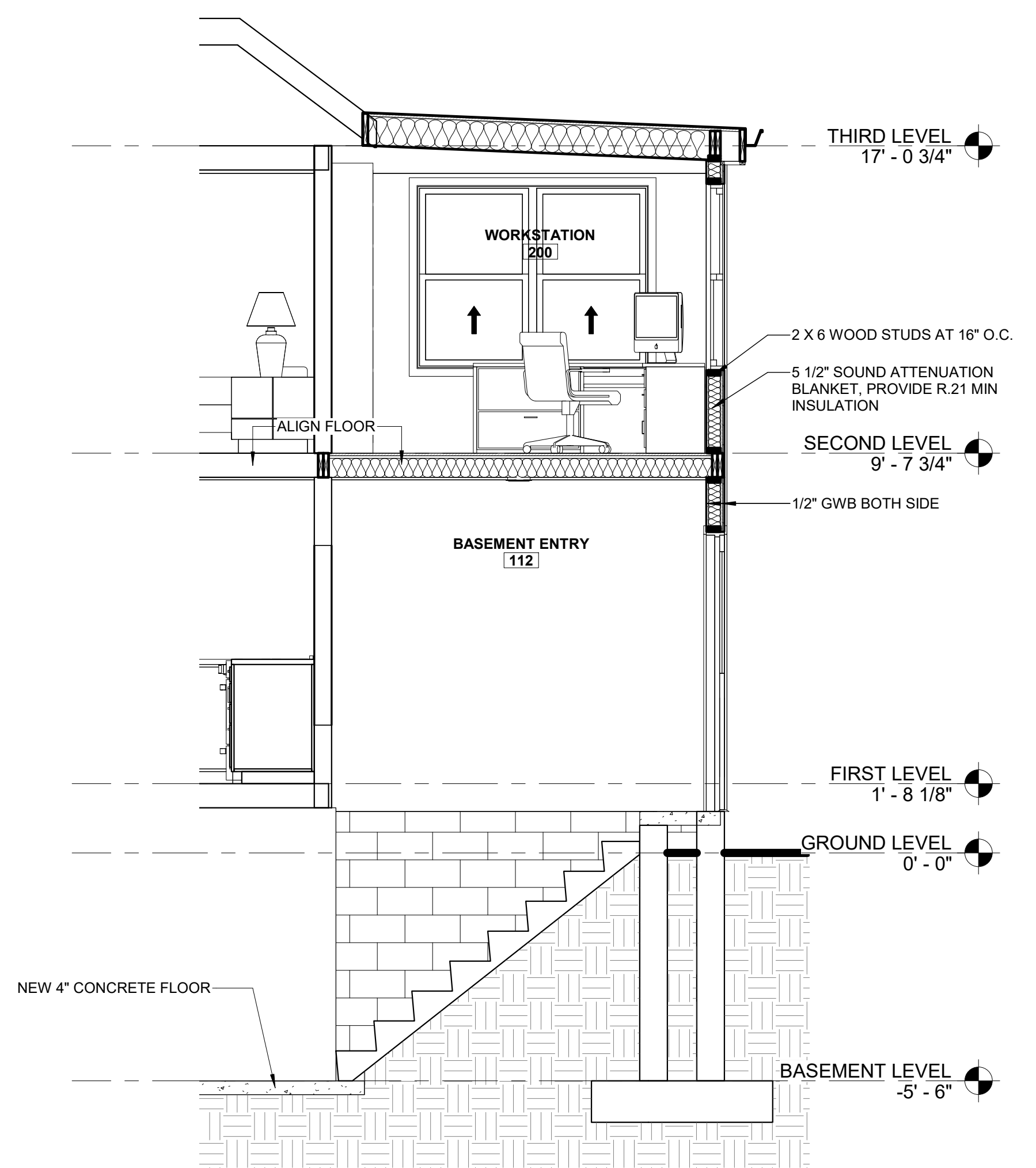
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PROJECT NO.:
 22270

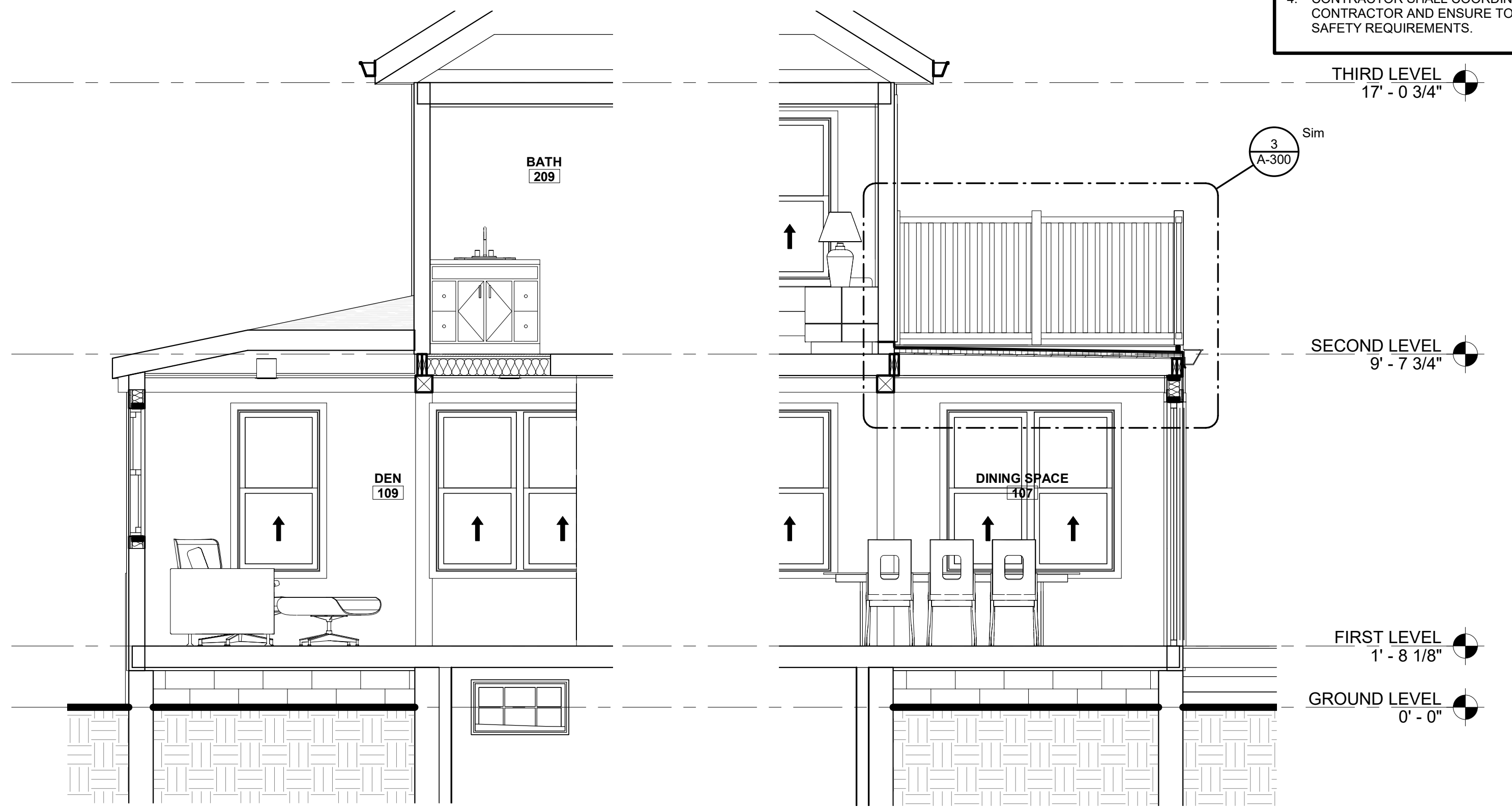
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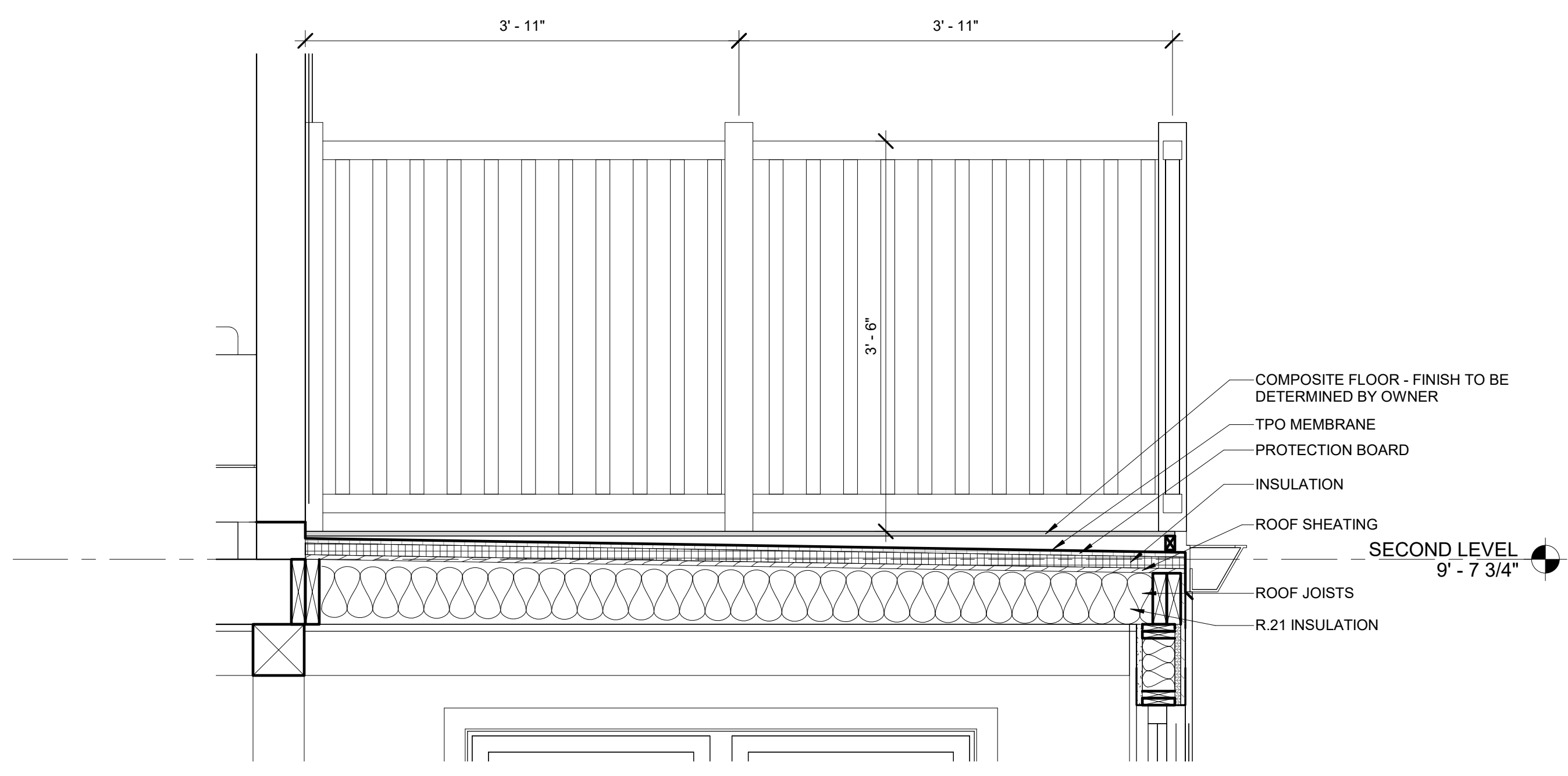
PROJECT LOCATION:
 1309 SASSAQUIN AVENUE, NEW BEDFORD, MA - COMPLETE RENOVATION PERMIT SET



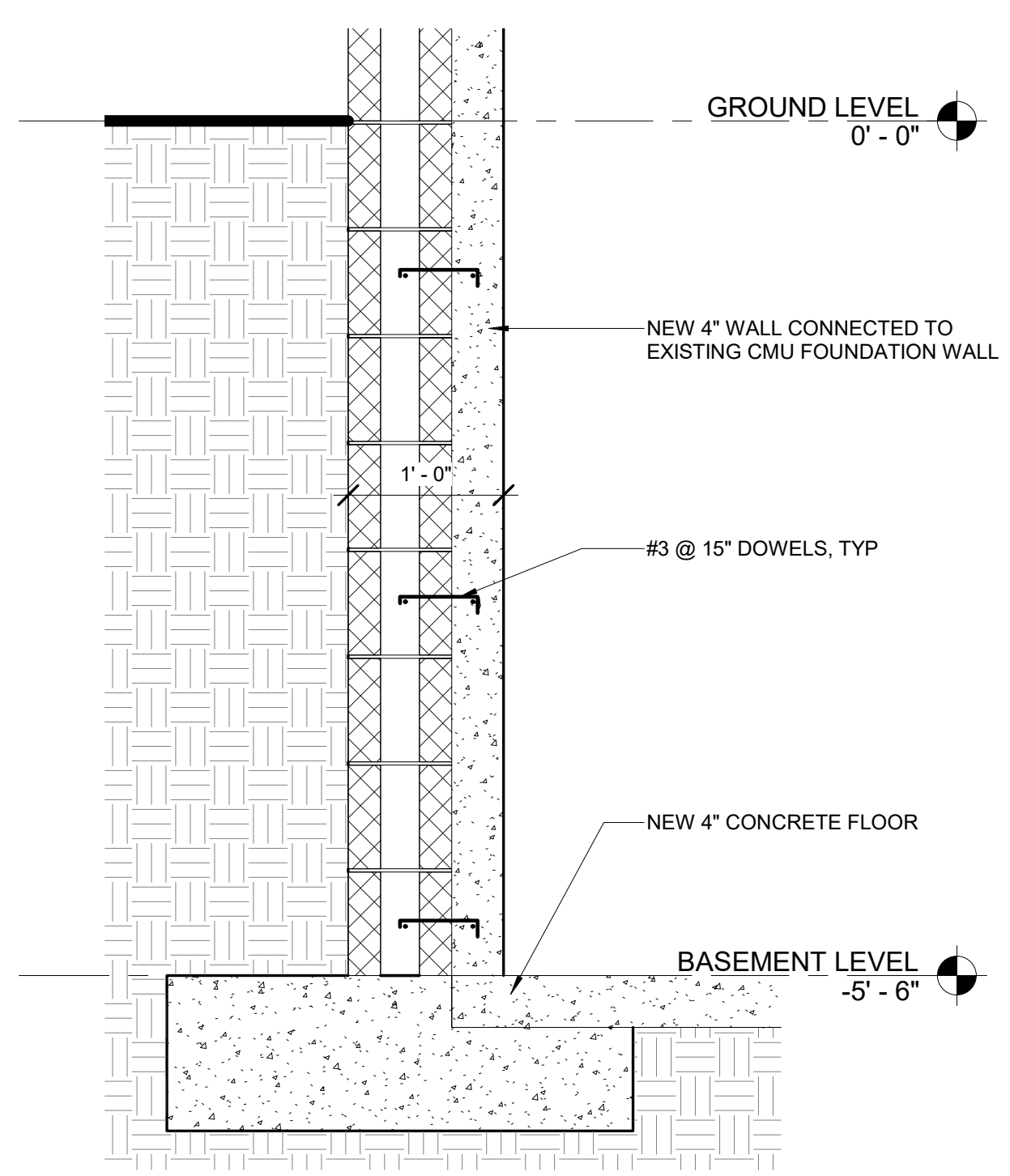
1 PROPOSED BUILDING SECTION 1
 3/8" = 1'-0"



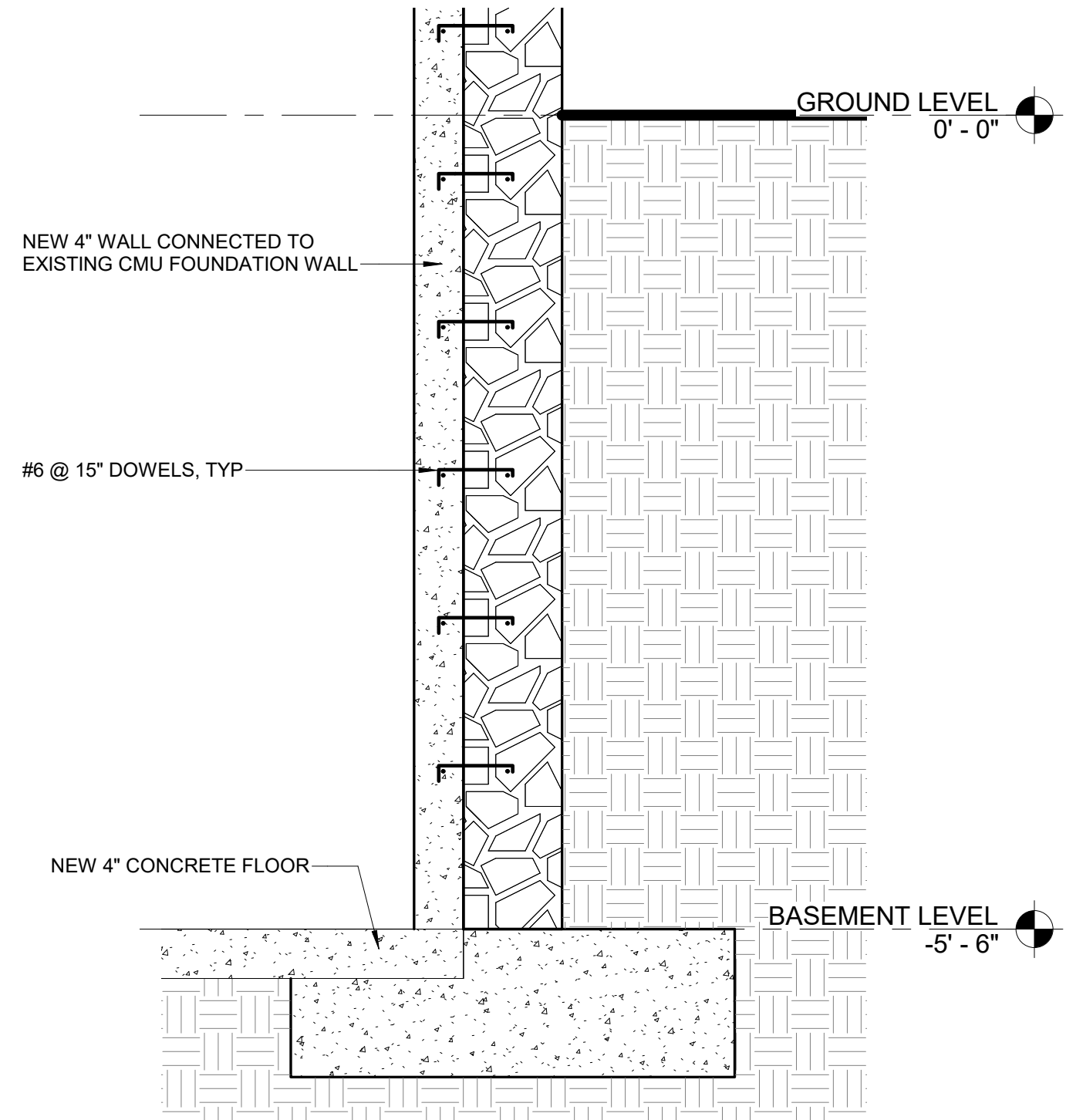
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 3/8" = 1'-0"



3 PROPOSED WALL SECTION
 1" = 1'-0"



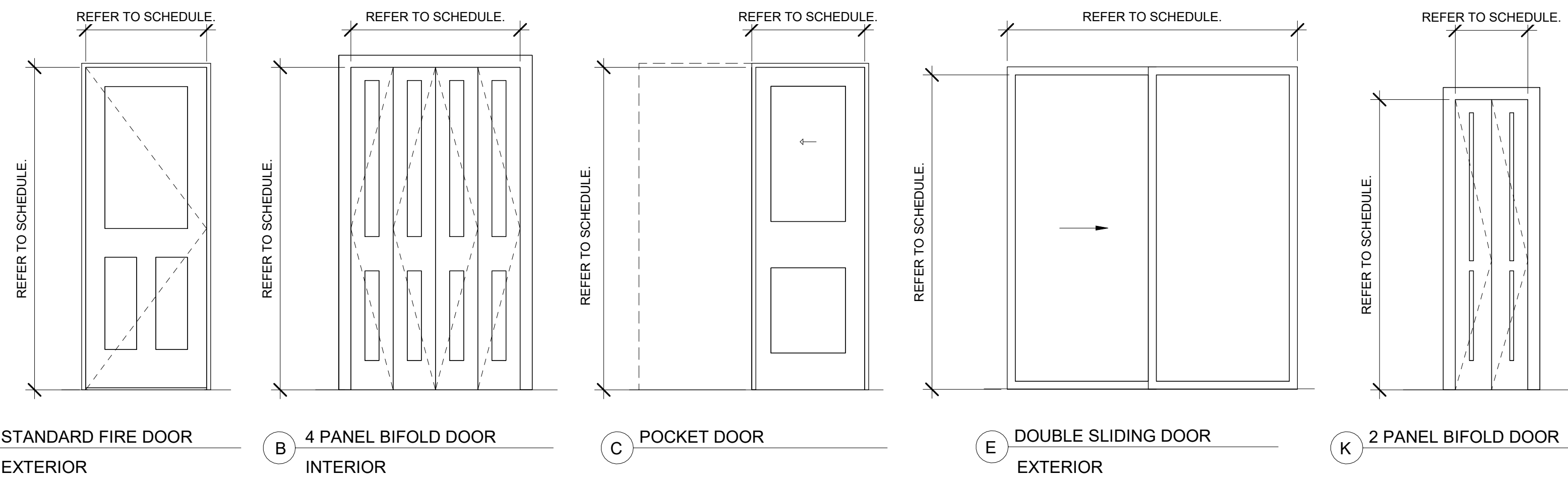
4 BASEMENT WALL SECTION 1
 1" = 1'-0"



5 BASEMENT WALL SECTION 2
 1" = 1'-0"

DOOR SCHEDULES

NO.	Type Mark	DOOR SIZE		COMMENTS
		HEIGHT	WIDTH	
101	A	6' - 8"	2' - 6"	
102	B	6' - 8"	3' - 6"	
104	C	6' - 8"	2' - 4"	
105	D	6' - 8"	4' - 8"	
108A	E	6' - 8"	6' - 0"	
108B	E	6' - 8"	6' - 0"	
109A	F	6' - 8"	3' - 0"	
109B	F	6' - 8"	3' - 0"	
110	C	6' - 8"	2' - 4"	
111	C	6' - 8"	2' - 4"	
112	G	6' - 8"	3' - 0"	
202	H	6' - 6"	5' - 0"	
203	I	6' - 6"	2' - 6"	
204	J	6' - 6"	4' - 8"	
205	J	6' - 6"	4' - 8"	
206	I	6' - 6"	2' - 6"	
207	I	6' - 6"	2' - 6"	
209	I	6' - 6"	2' - 6"	
210	K	6' - 0"	1' - 6"	
211A	L	6' - 6"	6' - 0"	
211B	L	6' - 6"	6' - 0"	
212	M	6' - 6"	2' - 0"	



GENERAL CONTRACTOR NOTES:

1. CONTRACTOR SHALL VERIFY ALL DIMENSIONS IN FIELD.
2. CONTRACTOR SHALL ADHERE TO ALL APPLICABLE CODES AND REGULATIONS.
3. CONTRACTOR SHALL INFORM ARCHITECT OF ANY ERRORS OR DEVIATIONS PRIOR TO CONTINUING WORK.
4. CONTRACTOR SHALL COORDINATE WITH EACH SUB-CONTRACTOR AND ENSURE TO MEET ALL CODE AND SAFETY REQUIREMENTS.

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1309 SASSAQUIN AVE - COMPLETE RENO

1309 SASSAQUIN AVENUE,
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REVISION:

NO.	DATE:	DESCRIPTION:
1	09.29.2022	PERMIT SET

DRAWING TITLE:
SECTIONS & PARTITIONS

DRAWN BY: GL
 CHECKED BY: MS
 SCALE: As indicated
 DATE: 09.29.2022
 PROJECT NO.: 22270

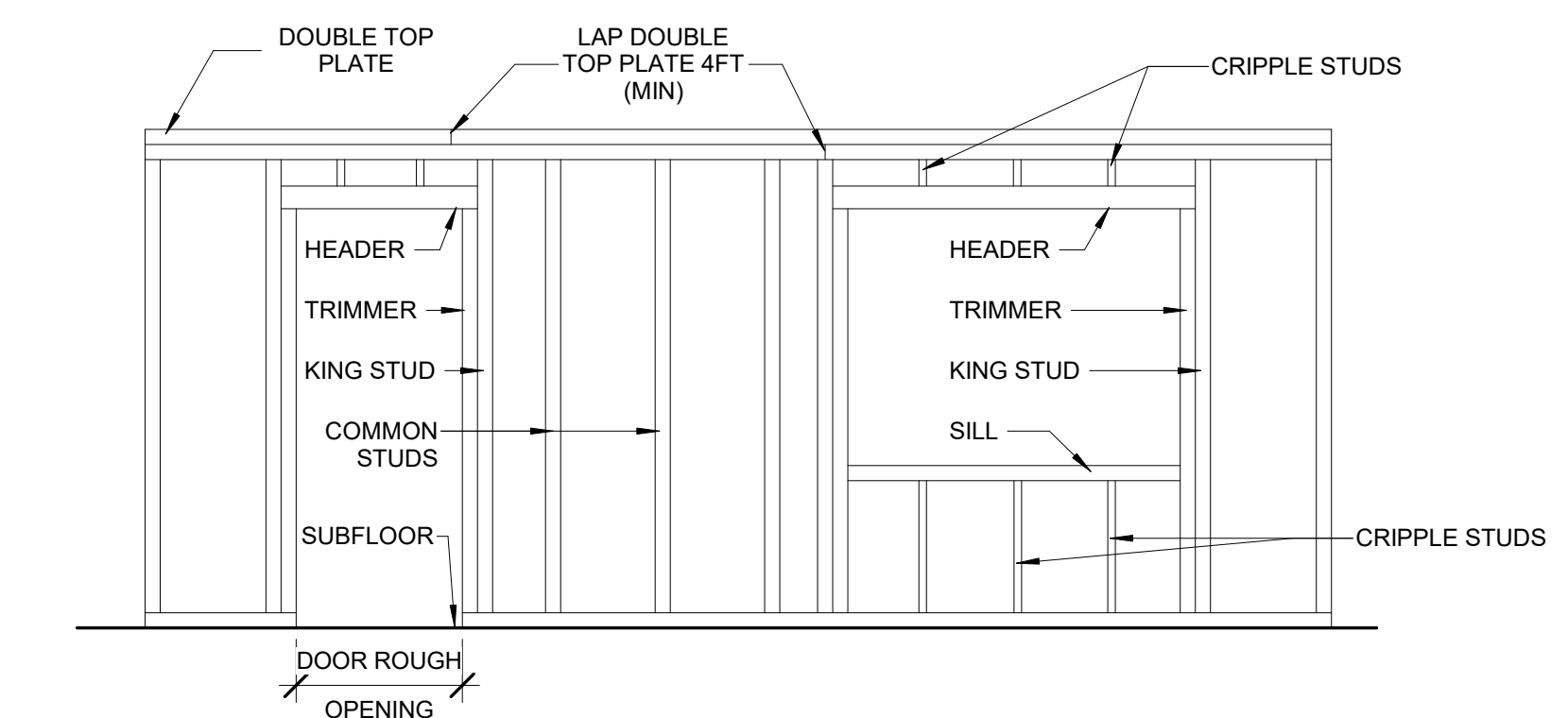
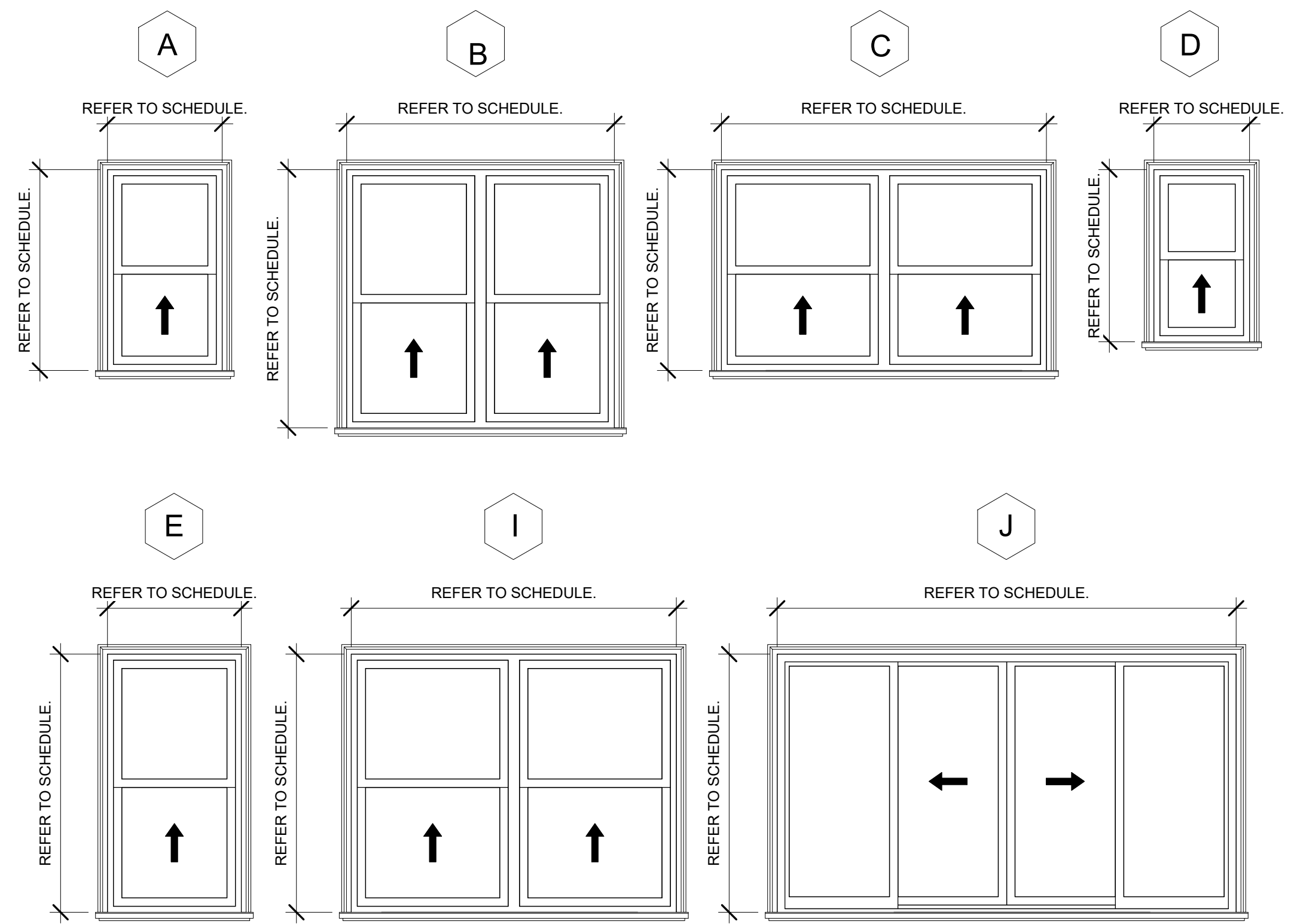


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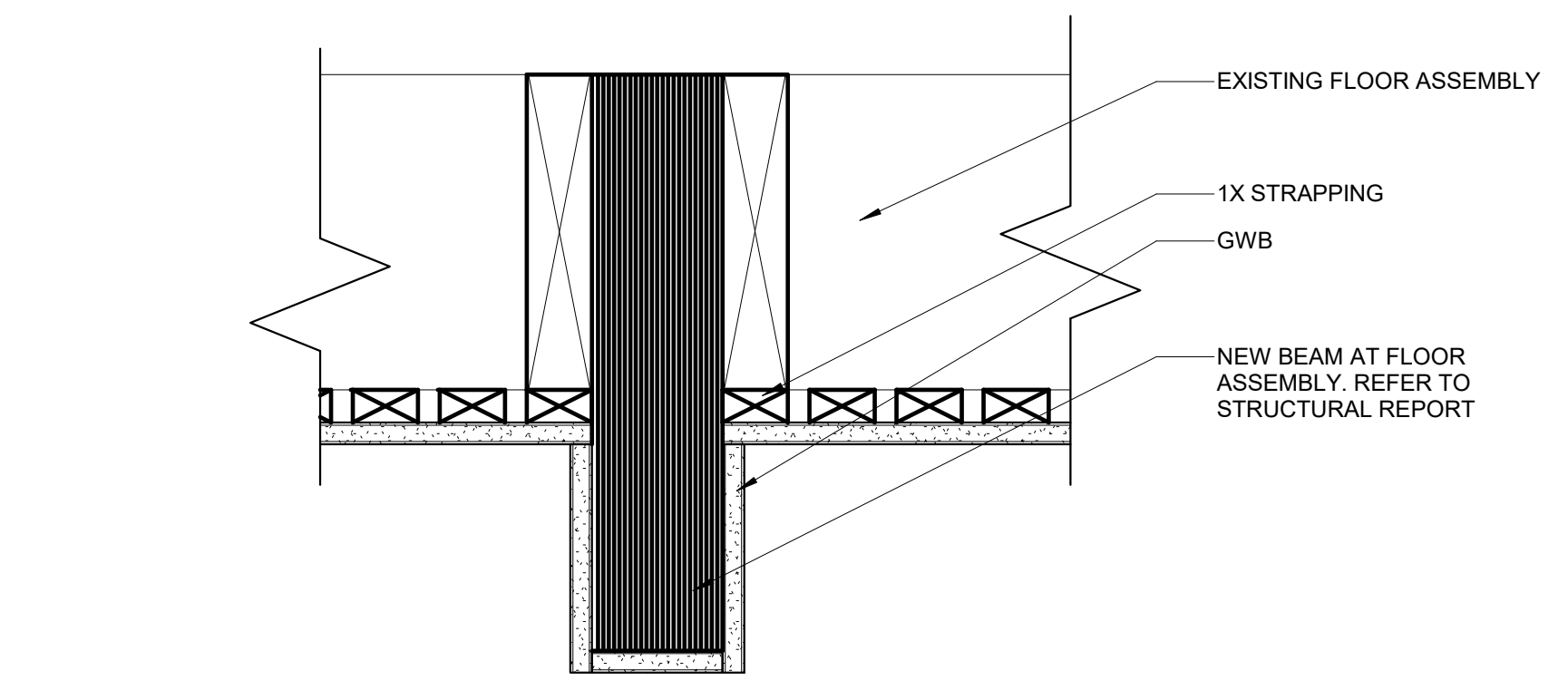
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WINDOW SCHEDULE

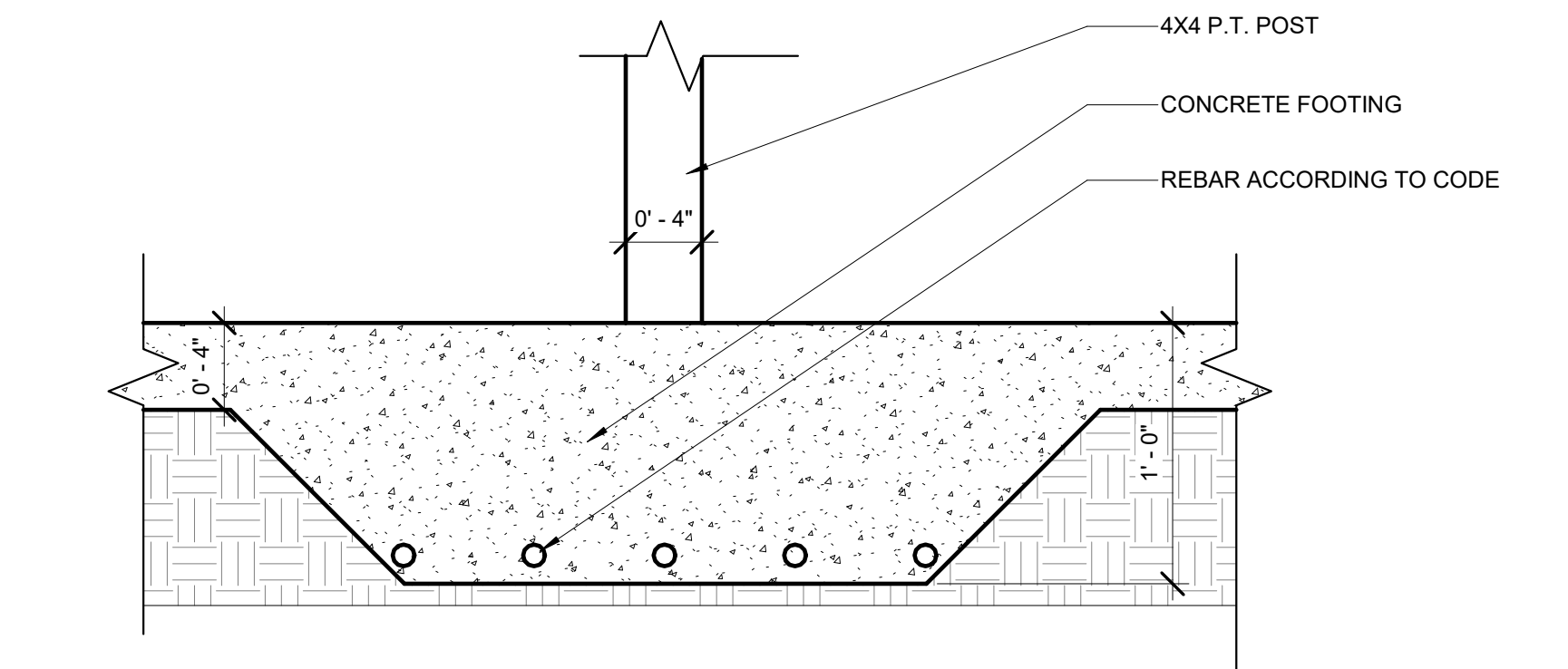
TYPE	WIDTH	HEIGHT	TEMPERED GLASS	EGRESS WINDOW	COMMENTS
A	2' - 0"	3' - 6"	No	No	
B	4' - 8"	4' - 6"	No	No	
C	5' - 8"	3' - 6"	No	No	
D	1' - 8"	3' - 0"	No	No	
E	2' - 4"	4' - 6"	No	No	
F	2' - 0"	3' - 6"	Yes	No	
G	2' - 4"	1' - 8"	Yes	No	
H	4' - 8"	4' - 6"	No	Yes	
I	5' - 8"	4' - 6"	No	No	
J	8' - 0"	4' - 6"	No	No	
K	4' - 8"	4' - 6"	No	Yes	
L	2' - 0"	3' - 6"	Yes	No	



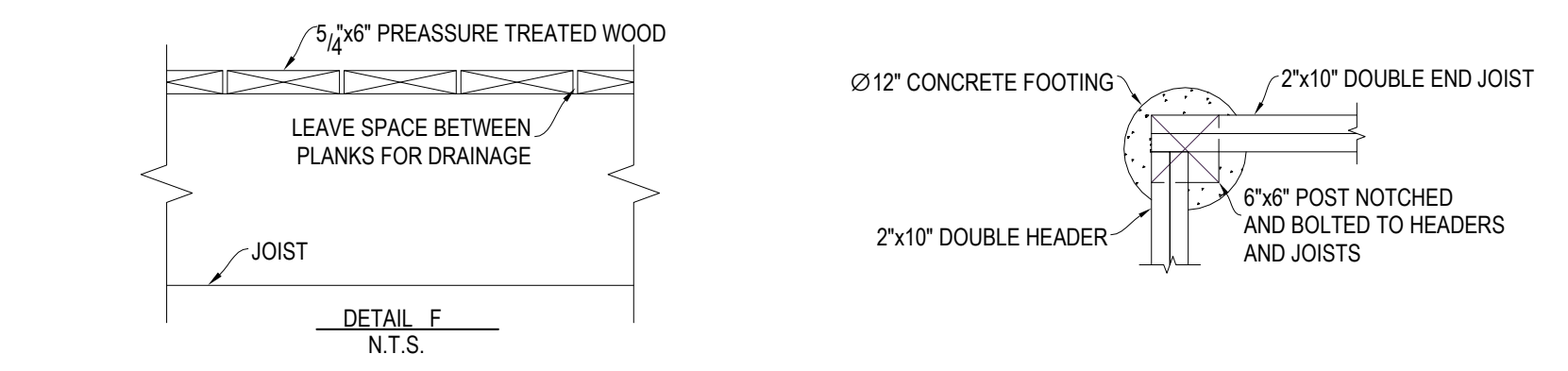
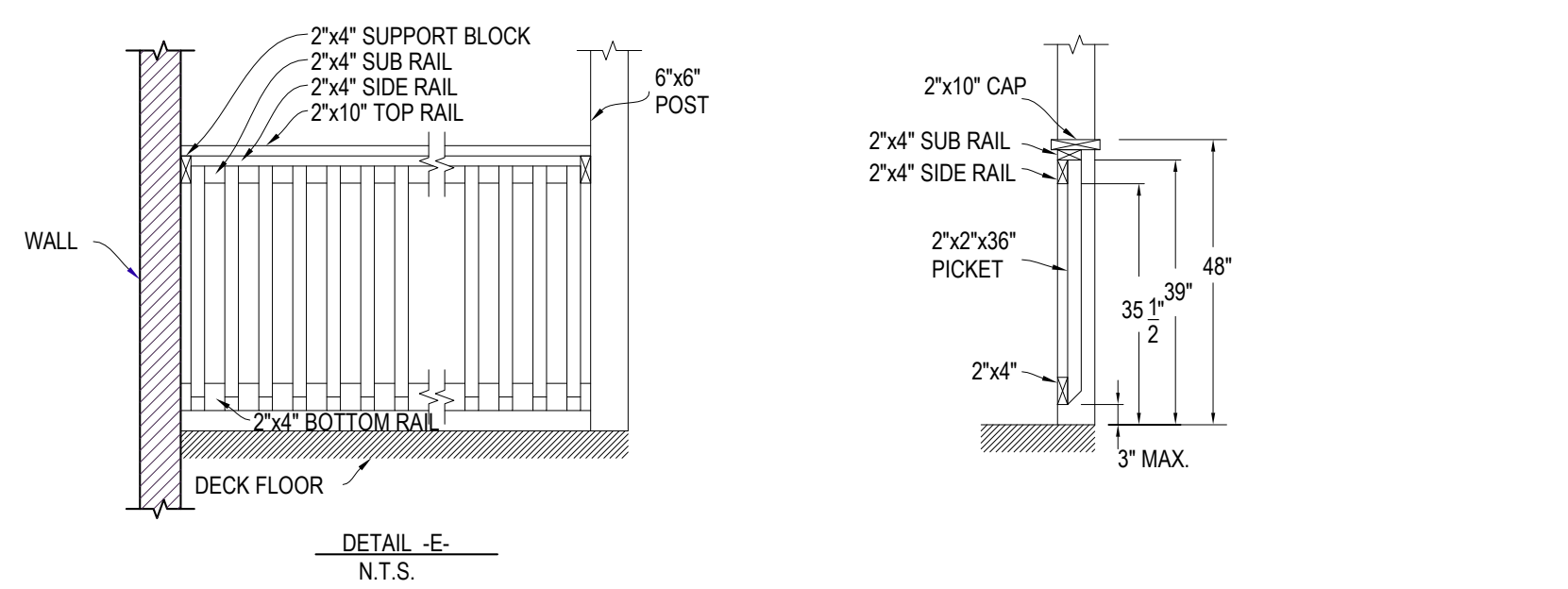
1 TYPICAL WALL FRAMING CONSTRUCTION
 1" = 1'-0"



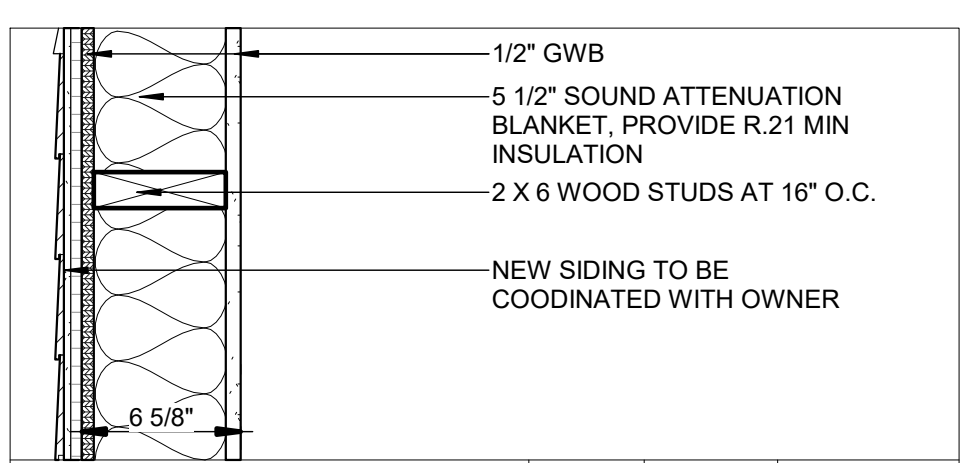
3 CEILING DETAIL
 3" = 1'-0"



4 COLUMN DETAIL
 1 1/2" = 1'-0"

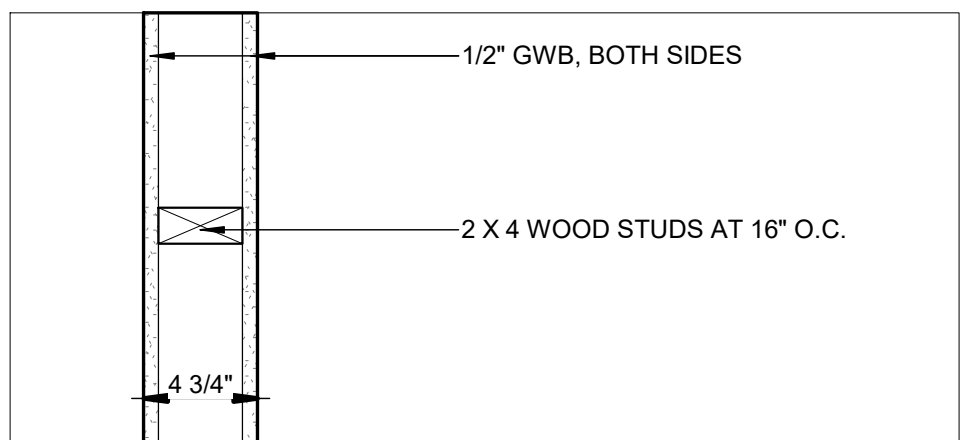


2 RAILING AND DECK DETAILS
 1/4" = 1'-0"



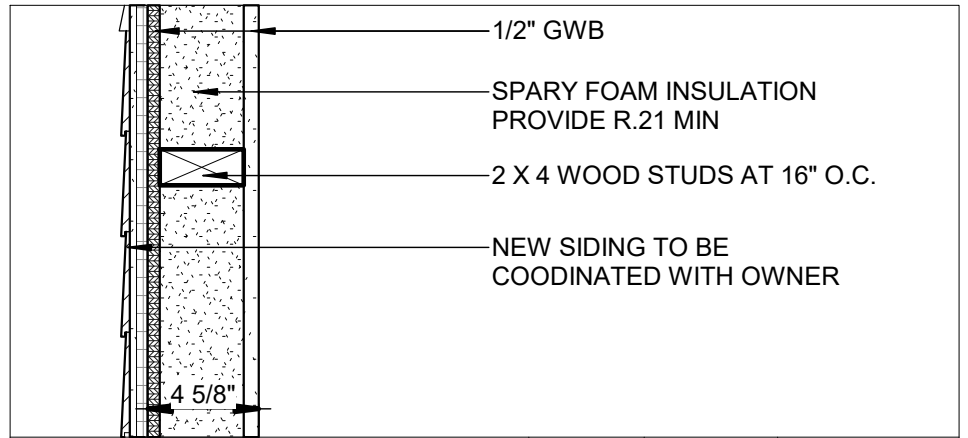
P1 EXTERIOR WALL
 NEW PARTITION

FIRE RATING	UL NUMBER	TESTING CODES
NA	NA	STC: NA USG: NA



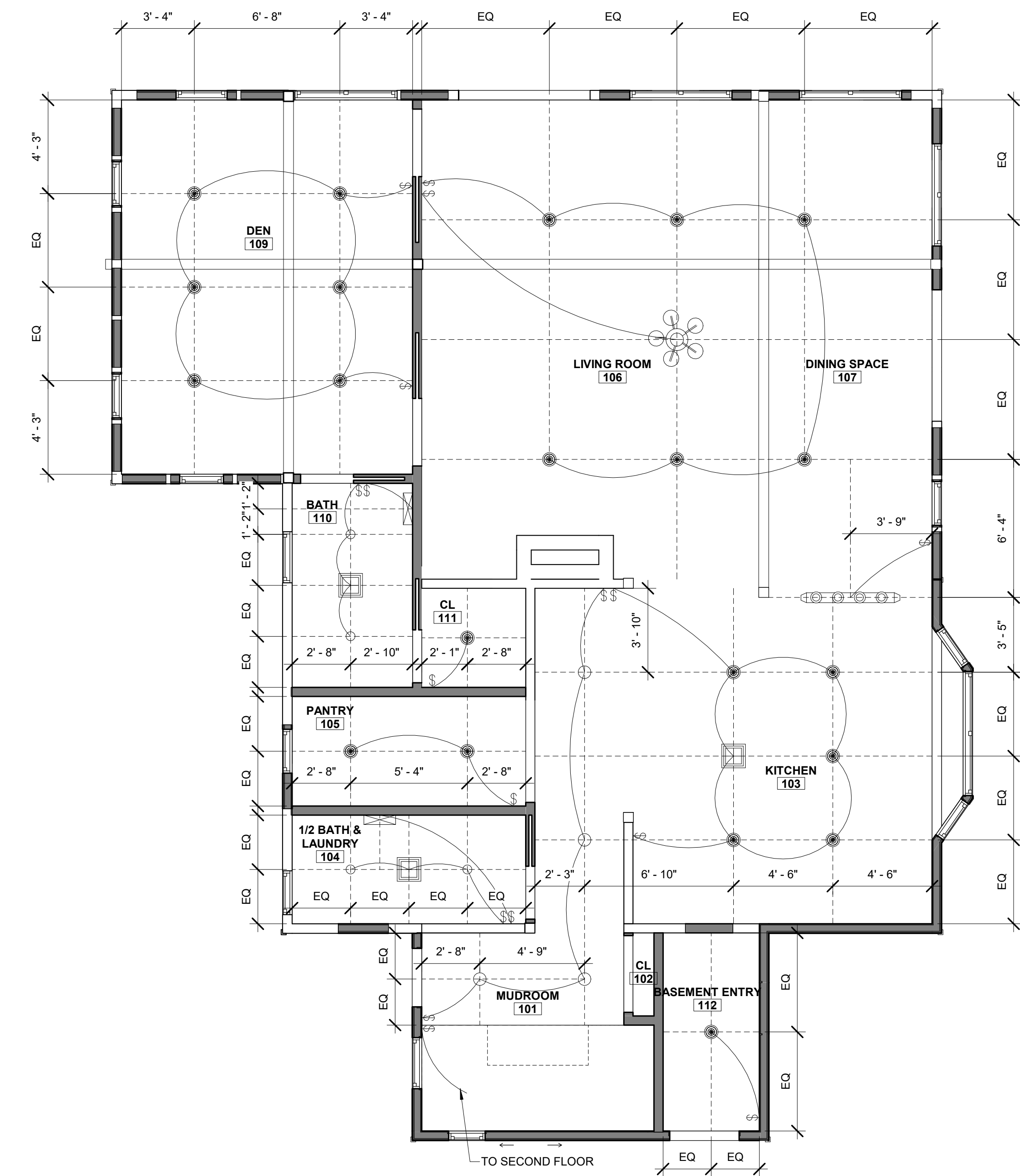
P2 INTERIOR WALL
 NEW PARTITION

FIRE RATING	UL NUMBER	TESTING CODES
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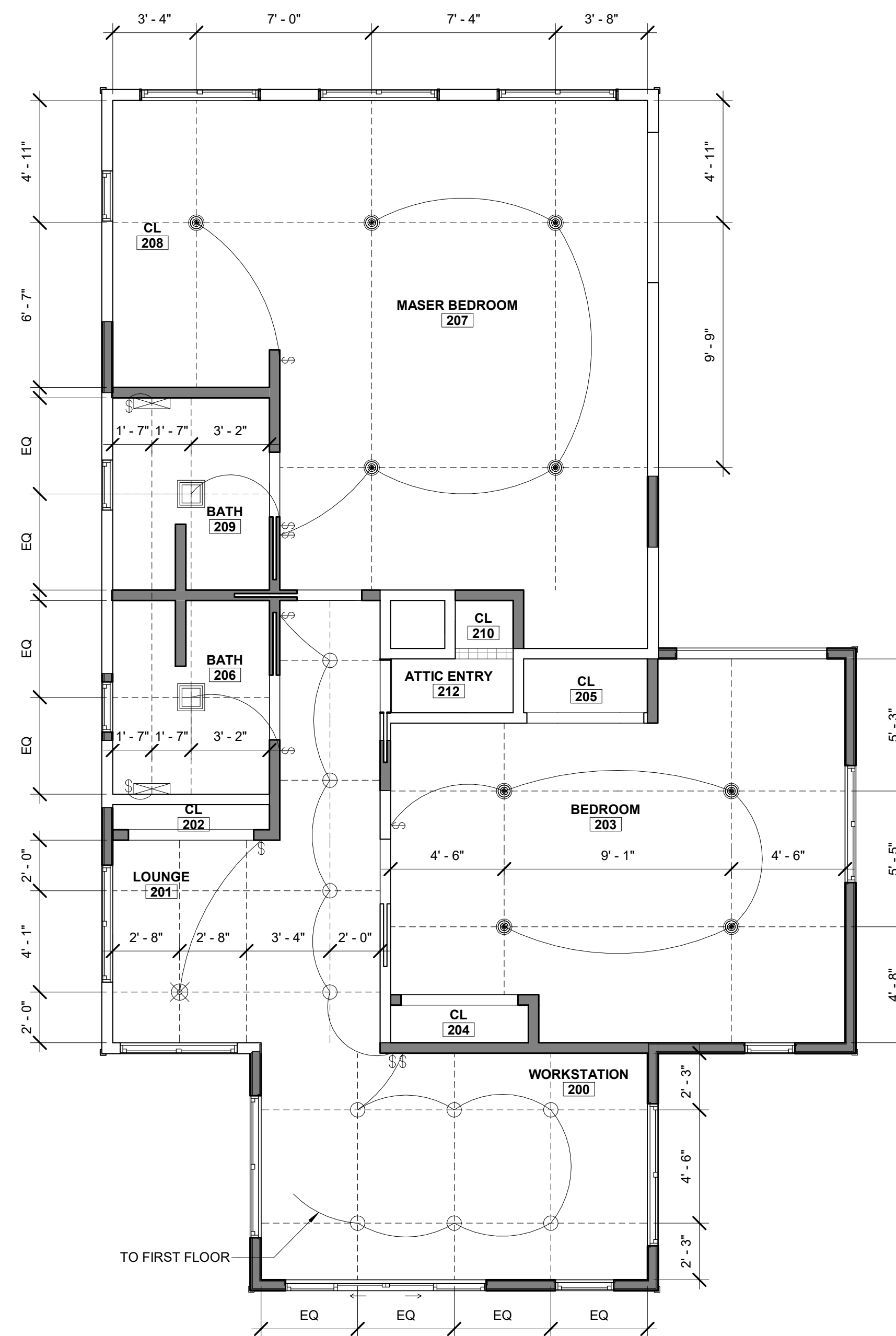


P3 EXTERIOR WALL
 EXISTING

FIRE RATING	UL NUMBER	TESTING CODES
NA	NA	STC: NA USG: NA



2 PROPOSED FIRST FLOOR RCP
1/4" = 1'-0"





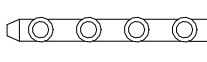
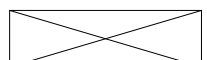



1 PROPOSED SECOND FLOOR RCP
1/4" = 1'-0"

GENERAL LIGHTING NOTE:

*CONTRACTOR SHALL ENSURE TO MAINTAIN ALL LIGHTING FIXTURE ALIGNMENTS. NOTIFY THE ARCHITECT IF CRITICAL ALIGNMENTS ARE TO CONFLICT WITH OTHER TRADES.

*CONTRACTOR TO COORDINATE ALL NEW HVAC LOCATION (RETURNS AND SUPPLY)

-  RECESSED CAN LIGHT
 -  SURFACE MOUNT LIGHT
 -  EXHAUST FAN W/LIGHT
 -  PENDANT LIGHT
 -  PENDANT LIGHT
 -  VANITY CABINET LIGHTING
 -  CHANDELIER
- ALL LIGHTS 2700K**

GENERAL CONTRACTOR NOTES:

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REVISION:

NO:	DATE:	DESCRIPTION:
1	09.29.2022	PERMIT SET

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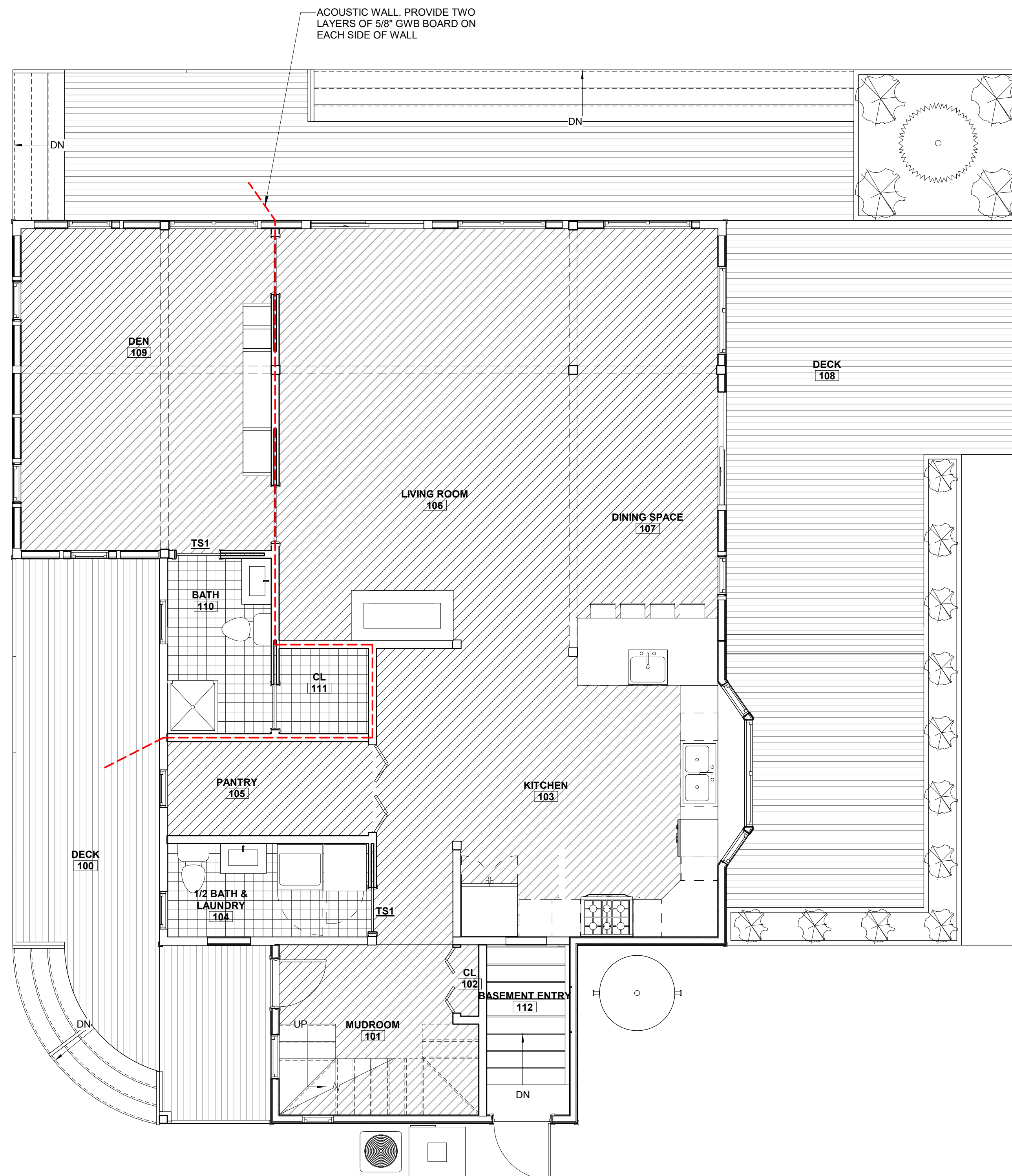
REFLECTED CEILING PLANS

DRAWN BY: GL	SEAL: 
CHECKED BY: MS	
SCALE: As indicated	
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PROJECT NO.: 22270	

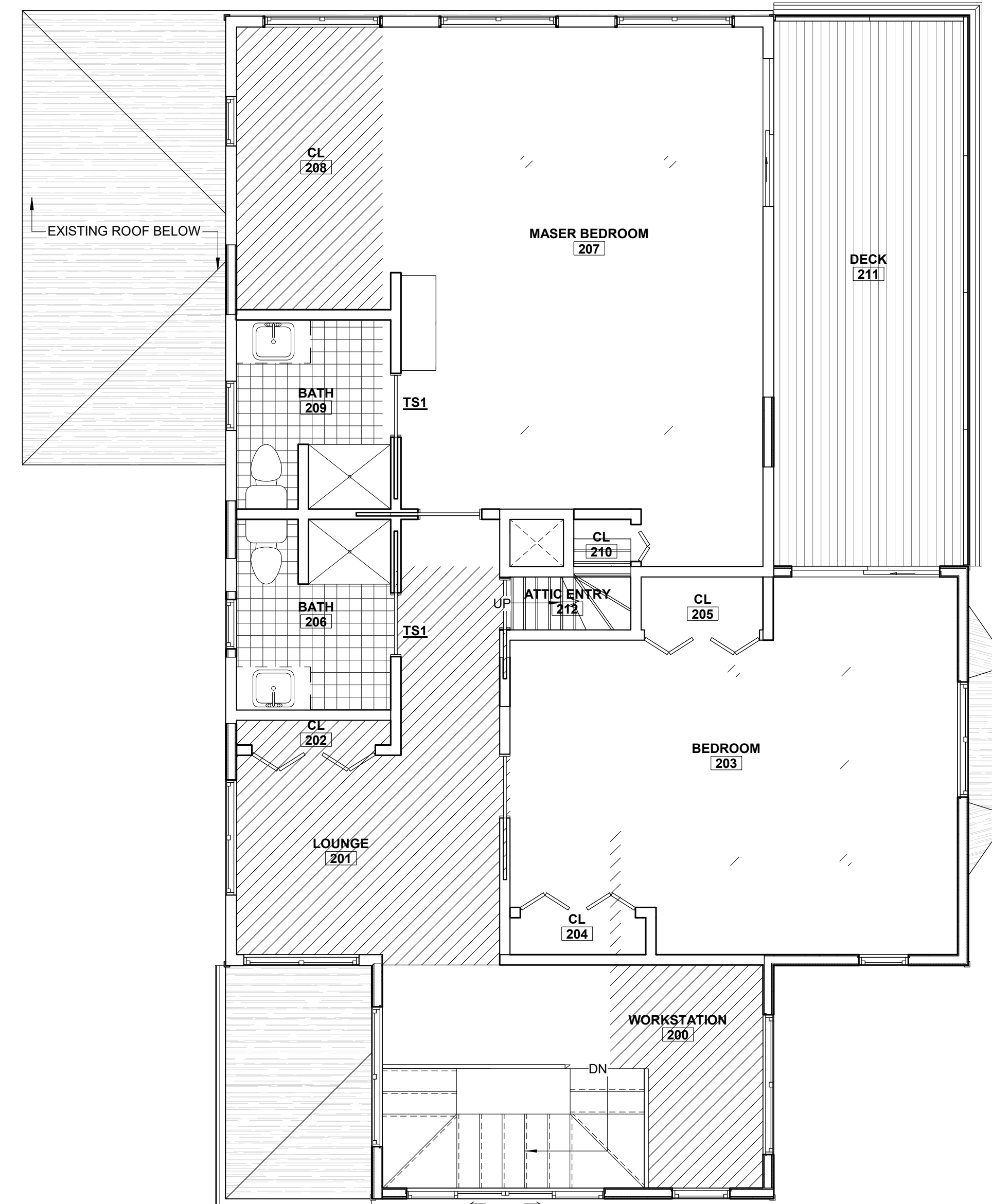
DRAWING NO.:

A-700

PROJECT LOCATION:
Y:\Flow\Projects\Architecture\2022\22270 1309 SASSAQUIN AVE, NEW BEDFORD, MA - COMPLETE RENOVATION\Rev0\22270 1309 SASSAQUIN AVE_PERMIT SET.dwg



2 PROPOSED FIRST FLOOR FINISH PLAN
1/4" = 1'-0"



1 PROPOSED SECOND FLOOR FINISH PLAN
1/4" = 1'-0"

FLOORING LEGEND FINISHES	
EXG	EXISTING FLOORING TO REMAIN
WD	MATCH EXISTING WOOD FLOOR
V1	VINYL FLOORING - FINISH TO BE DETERMINED BY OWNER
T1	FLOOR TILE - FINISH TO BE DETERMINED BY OWNER
C1	CARPET FLOORING - FINISH TO BE DETERMINED BY OWNER
CD 1	COMPOSITE FLOOR - FINISH TO BE DETERMINED BY OWNER

WALL BASE LEGEND FINISHES	
VB1	VINYL BASE - TO BE DETERMINED BY OWNER
TB1	TILE BASE - TO BE DETERMINED BY OWNER

WALL FINISH LEGEND FINISHES	
P1	PRIMARY PAINT - BENJAMIN MOORE. COLOR TO BE TO BE DETERMINED BY OWNER

COUNTER LEGEND FINISHES	
C1	MARBLE COUNTER FINISH DETERMINED BY OWNER. EDGE EASED SEAMLESS.

TRANSITION STRIP LEGEND FINISHES	
TS1	SCHLUTER - SIZE: CONFORM TO FIELD CONDITIONS

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REVISION:		
NO:	DATE:	DESCRIPTION:
1	09.29.2022	PERMIT SET

DRAWING TITLE: FINISH FLOOR PLAN

DRAWN BY:
GL

CHECKED BY:
MS

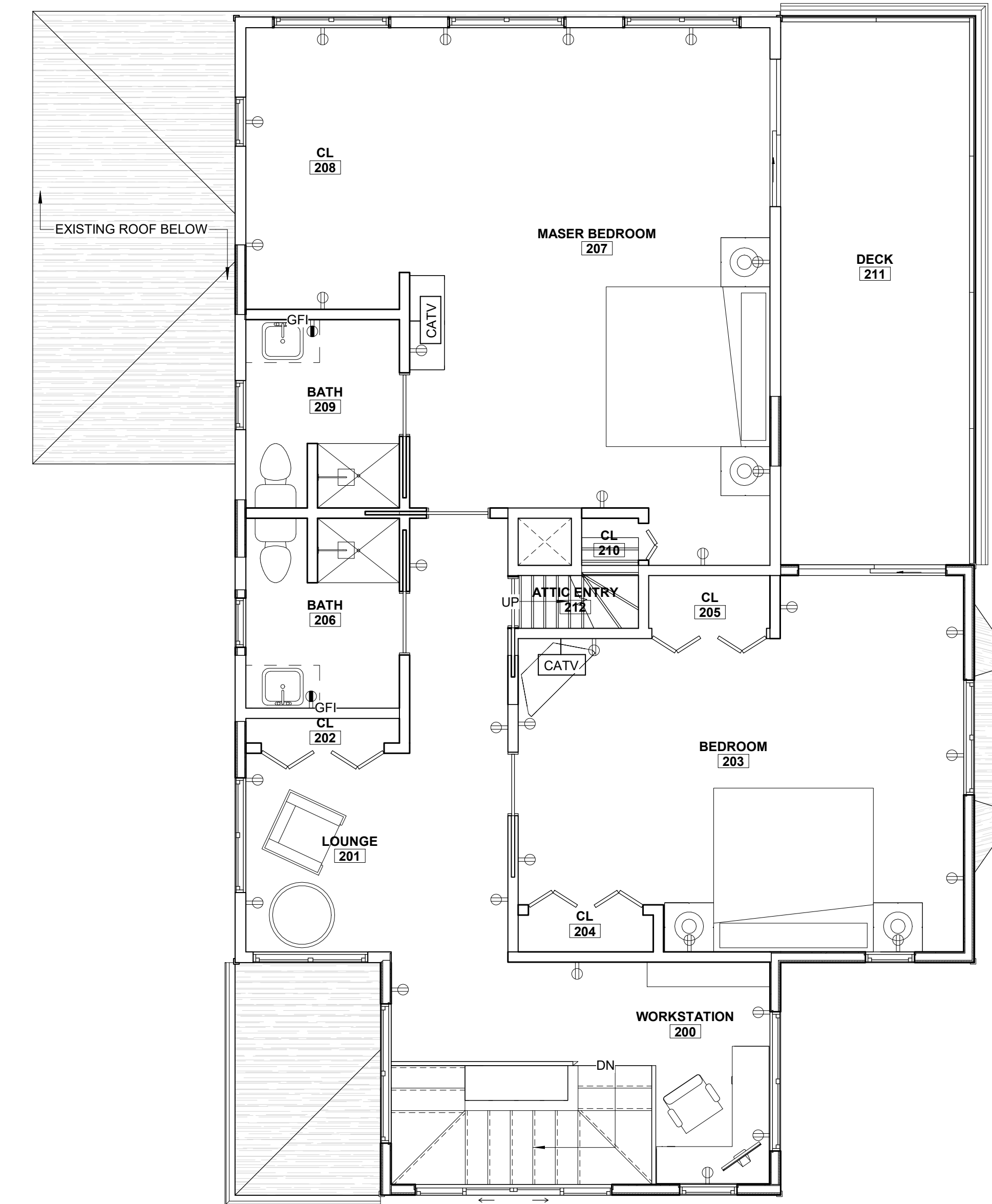
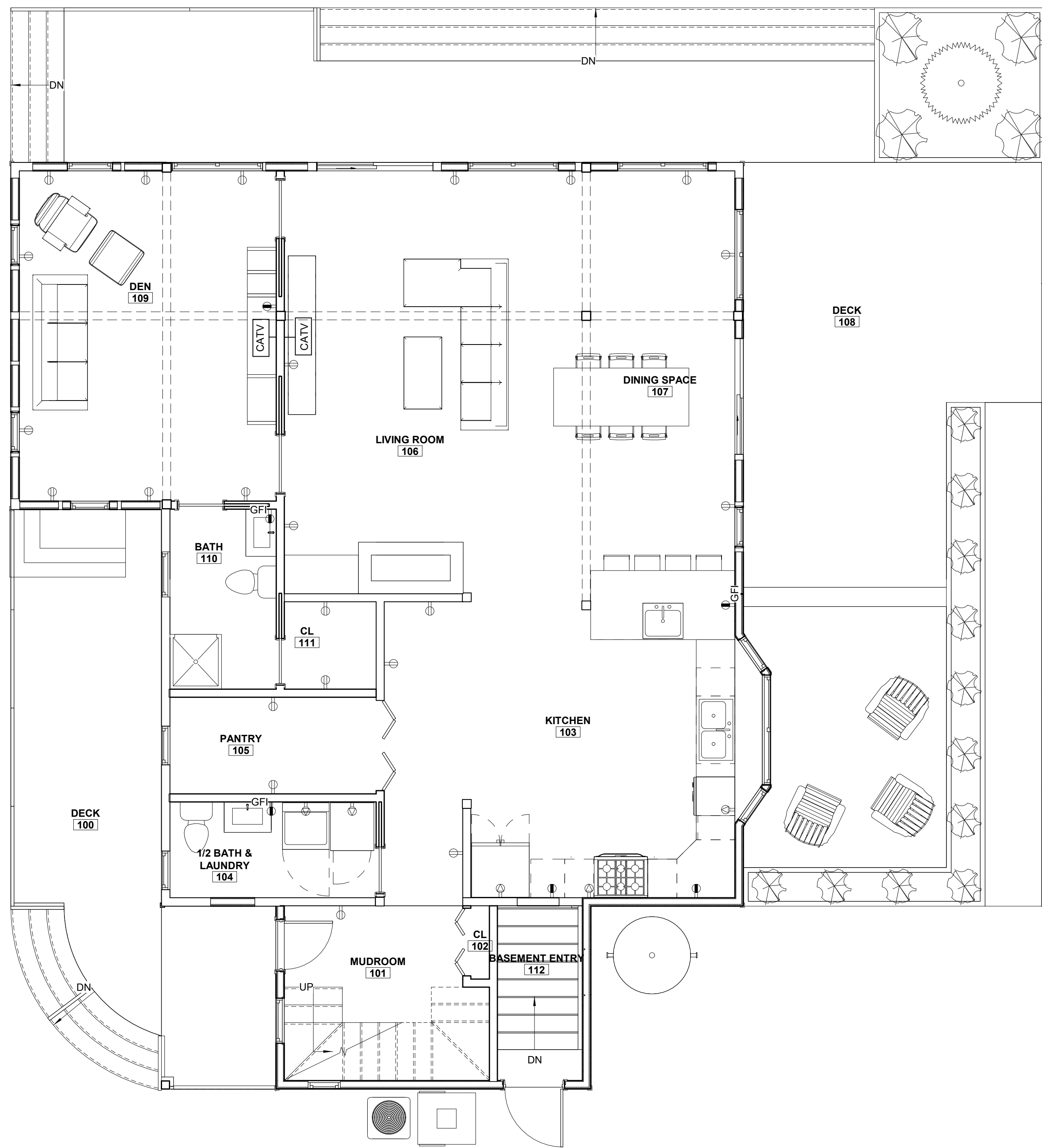
SCALE:
As indicated

DATE:
09.29.2022

PROJECT NO.:
22270

DRAWING NO.:
A-800

SEAL:



2 PROPOSED FIRST FLOOR COORDINATION PLAN
1/4" = 1'-0"

1 PROPOSED SECOND FLOOR COORDINATION PLAN
1/4" = 1'-0"

GENERAL ELECTRICAL AND LIGHTING NOTES:

ELECTRICAL WORK SHALL ADHERE TO ALL APPLICABLE LOCAL, STATE, AND FEDERAL BUILDING CODES.

1. ALL WALL SWITCHES SHALL BE LEVITON RESIDENTIAL GRADE "DECORA QUIET ROCKER SWITCHES"; COLOR OF SWITCHES & SWITCH PLATES SHALL BE WHITE.

2. ALL ELECTRIC, TELEPHONE AND CATV RECEPTACLES SHALL BE LEVITON RESIDENTIAL GRADE "DECORA" RECEPTACLES; COLOR OF RECEPTACLES AND PLATES SHALL BE WHITE. PROVIDE GFI TYPE RECEPTACLES AT ALL BATHROOM LOCATIONS AND ELSEWHERE REQUIRED BY CODE.

3. ALL DIMMER SWITCHES SHALL BE LEVITON RESIDENTIAL GRADE "DECORA SURE SLIDE" DIMMER; COLOR OF DIMMERS & DIMMER PLATES SHALL BE WHITE.

4. ELECTRICIAN SHALL LOCATE ALL FIXTURES ACCORDING TO ELECTRICAL PLANS AND INTERIOR ELEVATIONS. COORDINATE ANY PROPOSED DEVIATION FROM PLANS WITH ARCHITECT BEFORE ROUGH-IN.

5. ALL DIMENSIONS ARE TO FINISH FACE AND/OR CENTERLINE UNLESS OTHERWISE NOTED.

6. ALL OUTLETS TO BE CENTERED IN LENGTH OF WALL UNLESS NOTED OTHERWISE.

7. OUTLETS AT FLOOR ARE TO BE MOUNTED SO THAT THE CENTER OF OUTLET IS AT 12 3/4" ABOVE SUBFLOOR, TYPICAL, UNLESS NOTED OTHERWISE. SEE INTERIOR ELEVATIONS FOR ALL ABOVE COUNTER LOCATIONS IN KITCHEN AND BATHROOMS.

8. SWITCHES ARE TO BE MOUNTED SO THAT THE CENTER OF SWITCH IS AT 44 3/4" INCHES ABOVE SUBFLOOR, TYPICAL UNLESS NOTED OTHERWISE. SEE INTERIOR ELEVATIONS FOR ALL ABOVE COUNTER LOCATIONS IN KITCHEN AND BATHROOMS.

9. ALL CLOSET LIGHTS TO BE RECESSED MAGNETIC CONTACT SWITCHES RECESSED IN HEAD OF DOOR FRAME, UNLESS NOTED OTHERWISE.

10. AUTOMATIC CLOSET SWITCHES SHALL BE A GRI SECURITY PRODUCTS 3030-12 SWITCH WITH A CC-01 NS CURRENT CONTROLLER.

11. EXTERIOR LIGHTS TO HAVE DAYLIGHT AND OR TIMER SWITCHES TBD.

12. APPLICABLE POOL AREA CIRCUITS SHALL BE INTEGRATED IN AN EQUIPOTENTIAL BONDING GRID IN POOL AREA AS REQUIRED BY CODE. COORDINATE WITH LANDSCAPE ARCHITECT AND POOL CONTRACTOR.

13. AUDIBLE ALARM AS DESCRIBED BY MASS. BUILDING CODE 421.10.1.9.1 SHALL BE INSTALLED AT ALL DOORS EXITING TO THE POOL TERRACE.

14. SMOKE DETECTORS AND CARBON MONOXIDE DETECTORS SHALL BE INSTALLED IN ACCORDANCE WITH MASS. BUILDING CODE. GC SHALL COORDINATE WALKTHROUGH WITH FIRE INSPECTOR AND ARCHITECT TO DETERMINE LOCATIONS OF DETECTORS. DETECTOR MODEL TO TBD AND SHALL BE REVIEWED BY THE ARCHITECT PRIOR TO INSTALLATION.

15. ELECTRICAL DRAWINGS ASSUME A CENTRAL EXHAUST FAN SYSTEM FOR BATHS IN MAIN HOUSE. SWITCH LOCATIONS ARE NOTED IN DRAWINGS. GC SHALL COORDINATE SWITCHES AND INSTALLATION WITH MECHANICAL SUB.

16. GC WILL DETERMINE ELECTRICAL REQUIREMENTS FOR ALL MECHANICAL AND POOL SYSTEMS ACCORDING TO MANUFACTURERS SPECIFICATION IN ADVANCE AND COORDINATE WITH ELECTRICAL SUB. NOTE THAT REQUIRED ELECTRICAL SUPPLY FOR THESE SYSTEMS IS NOT SHOWN ON THESE DRAWINGS.

GENERAL CONTRACTOR NOTES:

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ELECTRICAL LEGEND

⊕	DUPLEX OUTLET - CENTER OF OUTLET AT 18" AFF
⊕	DUPLEX OUTLET - CENTER OF OUTLET @ 6" ABOVE BACKSPLASH OR AT 48" AFF
⊕ GFI	DUPLEX OUTLET (G.F.I.) - CENTER OF OUTLET @ 6" ABOVE BACKSPLASH OR AT 48" AFF
⊕	QUADRAPLEX OUTLET - CENTER OF OUTLET AT 18" AFF
⊕	QUADRAPLEX OUTLET (FLOOR MOUNTED)
⊕	DEDICATED OUTLET - CENTER OF OUTLET AT 6" ABOVE BACKSPLASH OR AT 48" AFF
⊕	DEDICATED OUTLET - CENTER OF OUTLET AT 6" ABOVE BACKSPLASH OR AT 48" AFF
CATV	COAXIAL CABLE

ELECTRICAL NOTES

1. ELECTRICAL SUBCONTRACTOR IS TO PROVIDE PULL STRINGS AND JUNCTION BOXES FOR ALL DATA LINES, TYPICAL.
2. ARCHITECTURAL PLANS DEPICT ELECTRICAL OUTLET TYPES AND LOCATIONS ARE FOR COORDINATION PURPOSES ONLY. FINAL OUTLET TYPES AND LOCATIONS TO BE DETERMINED BY ELECTRICAL ENGINEER.

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REVISION:

NO:	DATE:	DESCRIPTION:
1	09.29.2022	PERMIT SET

**DRAWING TITLE:
COORDINATION
PLANS**

DRAWN BY:
GL

CHECKED BY:
MS

SCALE:
As indicated

DATE:
09.29.2022

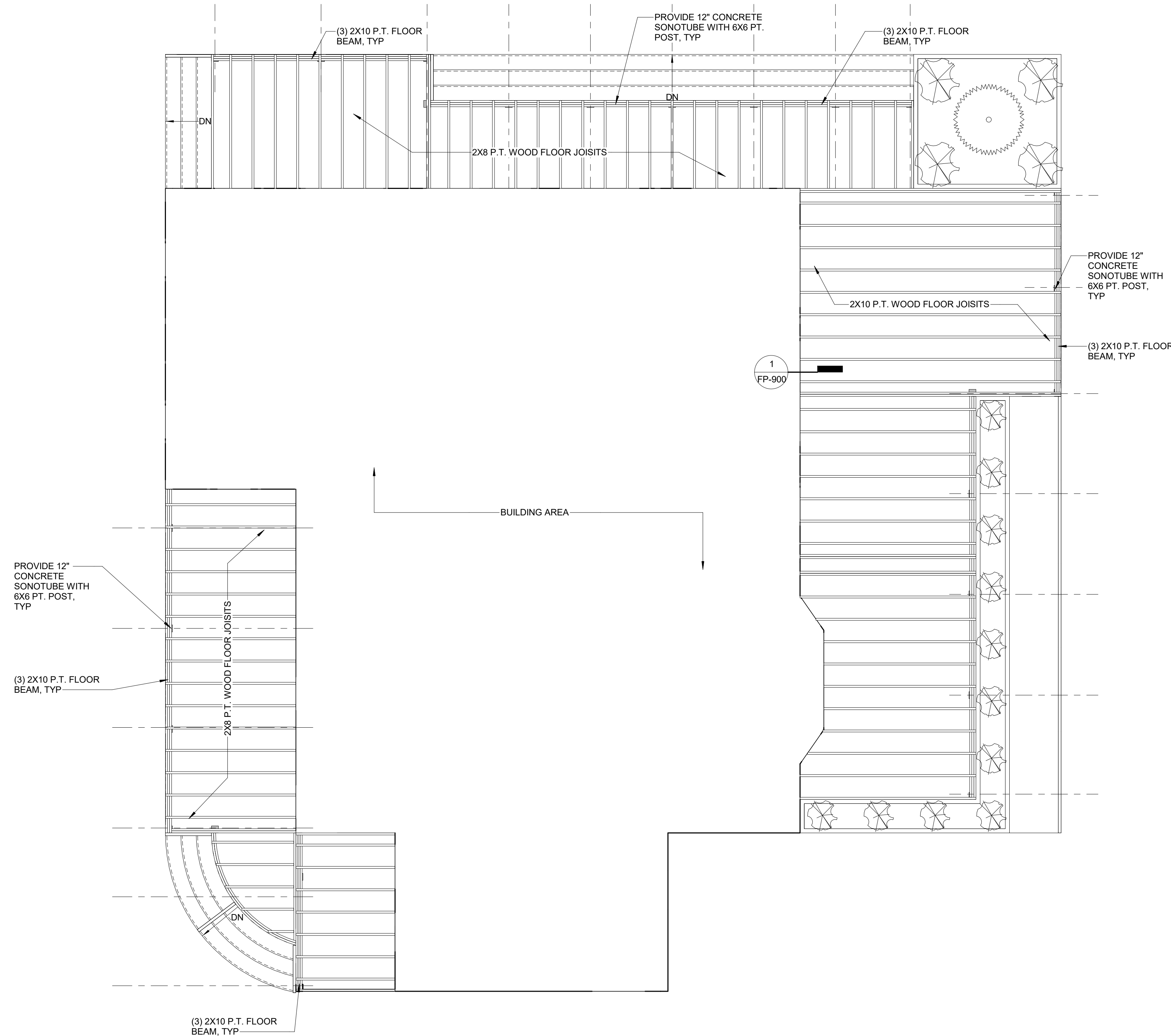
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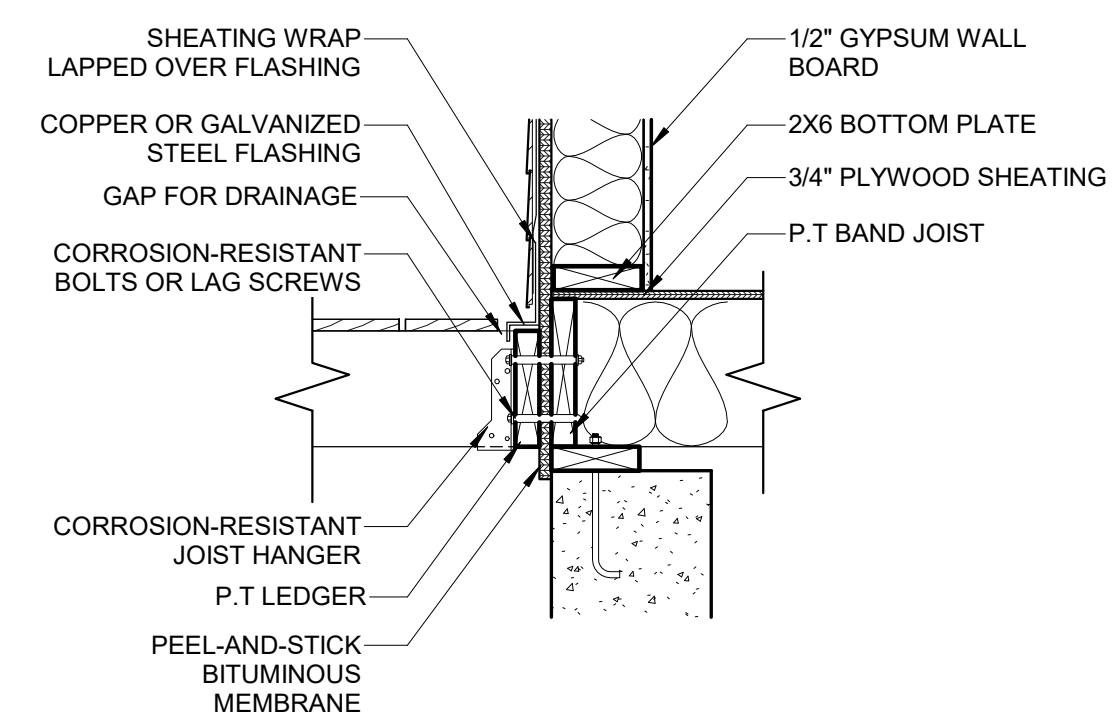
DRAWING NO.:
A-900

WOOD & ENGINEERED WOOD CONSTRUCTION

- DIMENSIONAL LUMBER TO BE SPRUCE-PINE-FIR (SPF) NO. 2 OR BETTER UNO.
- ALL ENGINEERED LUMBER SHALL BE INSTALLED PER MANUFACTURER'S SPECIFICATIONS.
- ALTERNATE PRODUCTS SHALL NOT BE SUBSTITUTED UNLESS APPROVED IN WRITING BY ENGINEER OF RECORD.
- LVL'S (LAMINATED VENEER LUMBER) TO BE 1.9E MICROLAM LVL BY ILEVEL.
- PSL'S (PARALLEL STRAND LUMBER) TO BE 2.0E PARALLAM PSL BY ILEVEL.
- 1 3/4" LSL'S (LAMINATED STRAND LUMBER) TO BE 1.55E TIMBERSTRAND LSL BY ILEVEL.
- 1 1/2" LSL'S TO BE 1.5E TIMBERSTRAND LSL BY ILEVEL.
- WOOD I-JOISTS TO BE TJI BY ILEVEL.
- PROVIDE SIMPSON CONNECTORS AT POST/BEAM, POST BASE, JOIST/BEAM AND BEAM/BEAM CONNECTIONS. USAGE AND INSTALLATION TO BE IN ACCORDANCE WITH MANUFACTURER'S INSTRUCTIONS. PROVIDE SIMPSON HURRICANE TIES AT ROOF RAFTER CONNECTIONS TO STUD WALL CONNECTIONS OR SUPPORTING BEAMS.
- PROVIDE MINIMUM 3/4" PLYWOOD SHEATHING FOR FLOORS AND ROOFS. PLYWOOD TO BE APA-RATED EXPOSURE 1 GRADE C-D (CDX). PROVIDE 1/8" SPACE BETWEEN EDGES OF ADJACENT PLYWOOD PANELS AND STAGGER PANEL JOINTS BETWEEN ROWS OF SHEATHING.
- ALL PLYWOOD FLOOR AND ROOF SHEATHING SHALL BE GLUED AND SCREWED TO SUPPORTING WOOD FRAMING. GLUE SHALL CONSIST OF CONSTRUCTION GRADE ADHESIVE. SCREWS NOT TO BE PLACED WITHIN 3/8" OF PANEL EDGES. MAXIMUM SCREW SPACING TO BE 6". UNO. SCREWS TO BE MIN #8x2 1/2" LONG. SCREW LENGTH SHALL BE SUFFICIENT TO PROVIDE EMBEDMENT OF 10X SCREW DIAM INTO FRAMING.
- PROVIDE MINIMUM 1/2" PLYWOOD SHEATHING FOR EXTERIOR WALLS AND SHEAR WALLS. FASTEN SHEATHING TO STUDS WITH MINIMUM 8d NAILS @ 4" O.C..
- PROVIDE CONTINUOUS BLOCKING ABOVE INTERIOR SHEAR WALLS.
- MAXIMUM MOISTURE CONTENT OF DIMENSIONAL LUMBER AT TIME OF INSTALLATION TO BE 19%.
- SILL PLATE ANCHOR BOLTS: PROVIDE 1/2" ANCHOR BOLTS AT 3'-0" O.C. TWO BOLTS MINIMUM PER SILL PIECE WITH A BOLT WITHIN 10" OF EACH END OF EACH PIECE. BOLT SPACING SHALL BE COORDINATED PRIOR TO PLACING OF STUDS AND POSTS TO AVOID CONFLICTS. ALL BOLTS SHALL HAVE STEEL WASHERS. SEE TYPICAL DETAILS AND SHEAR WALL SCHEDULE FOR ADDITIONAL SILL BOLT REQUIREMENTS.
- PROVIDE PERPENDICULAR BLOCKING AT 32 INCHES O.C. BETWEEN ALL PERIMETER JOISTS AND EXTERIOR WALLS OR PERIMETER BEAMS.
- STAND-ALONE WOOD POSTS OVER CONCRETE SHALL BEAR UPON SIMPSON POST BASE EMBEDDED IN OR ANCHORED TO CONCRETE FOUNDATION.
- WASHERS SHALL ALWAYS BE INSTALLED BETWEEN BOLT HEADS OR NUTS AND WOOD OR ENGINEERED WOOD.



2 PROPOSED DECK FRAMING PLAN
1/4" = 1'-0"



1 DECK - LEDGER ATTACHMENT DETAIL
1" = 1'-0"

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REVISION:

NO:	DATE:	DESCRIPTION:
1	09.29.2022	PERMIT SET

DRAWING TITLE:

FRAMING PLAN DECK

DRAWN BY:

GL

CHECKED BY:

MS

SCALE:

As indicated

DATE:

09.29.2022

PROJECT NO.:

22270

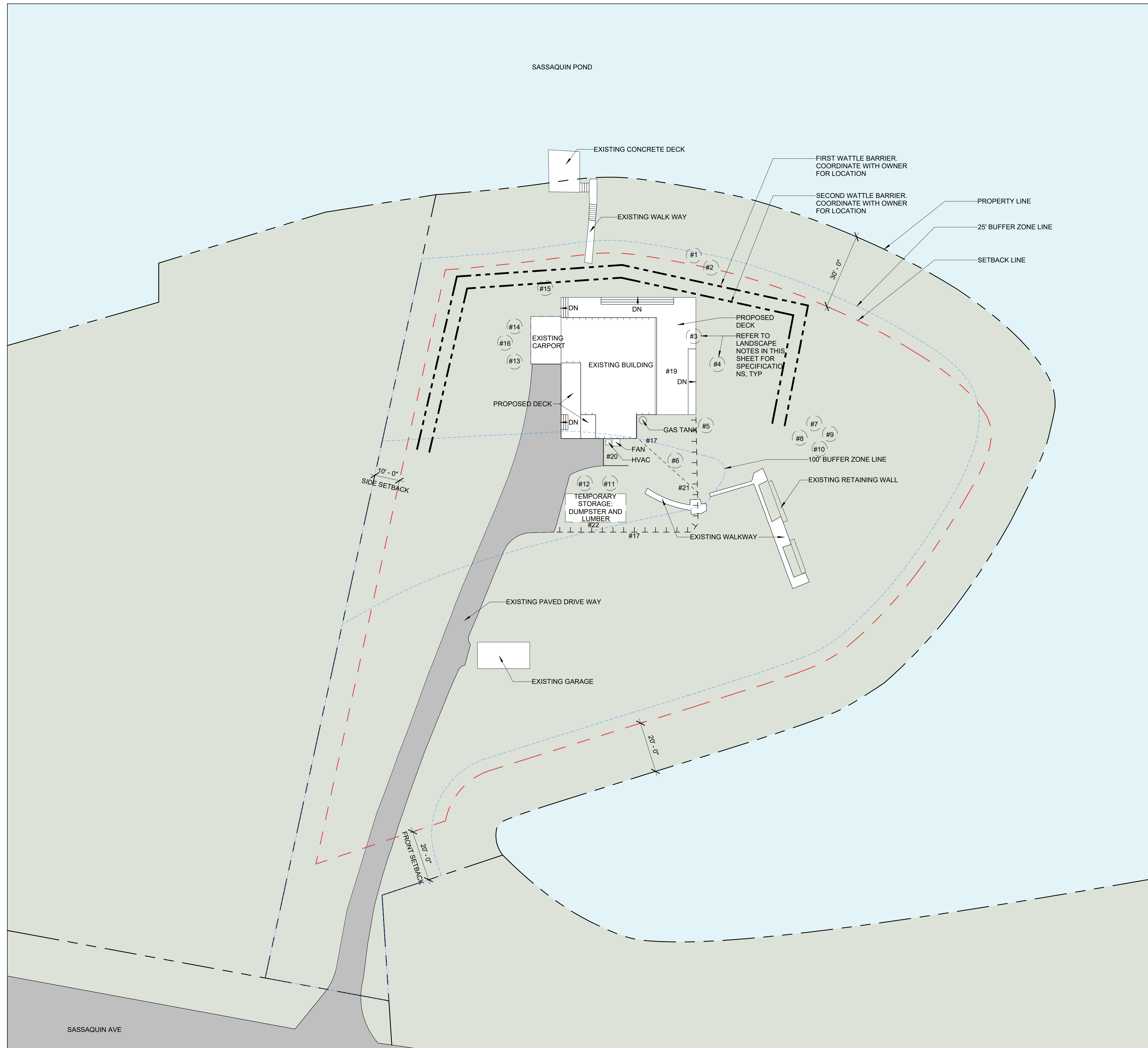
DRAWING NO.:

FP-900

SEAL:



PROJECT LOCATION:
Y:\Flow\Projects\Architecture\2022\22270 1309 SASSAQUIN AVE, NEW BEDFORD, MA - COMPLETE RENO\A_Rev0\22270 1309 SASSAQUIN AVE_PERMIT SET.rvt



North Project

SURVEY INFORMATION BASED OF SURVEY PREPARED BY THOMPSON FARLAND

- LANDSCAPE GENERAL NOTES**
- REMOVE TREES AS NEEDED. COORDINATE WITH OWNER FOR TOTAL AMOUNTS AND LOCATIONS.
1. DEAD TREE - CUT TO 6FT.
 2. TREE REMAINS. PRUNE BRANCHES
 3. FUNGAL INFECTION TREE & STUMP TO BE REMOVED PREP AREA FOR NEW DECK
 4. TREE REMAINS. PRUNE BRANCHES
 5. TREE & STUMP NEXT TO CEMENT PIT TO BE REMOVED
 6. BUSH & TREE/ STUMP TO BE REMOVED
 7. HEAVILY LEANING OAK TREE & STUMP TO BE REMOVED
 8. TREE & STUMP TO BE REMOVED
 9. TREE & STUMP TO BE REMOVED
 10. TREE & STUMP TO BE REMOVED
 11. CUT EXISTING TREE TO 6 FEET
 12. CUT EXISTING TREE TO 6 FEET
 13. CUT EXISTING TREE TO 6 FEET. TREE SLABS TO BE CUT & DONATED FOR HISTORICAL USE EXAMINATION
 14. CUT EXISTING TREE TO 6 FEET.
 15. TREE REMAINS. PRUNE BRANCHES
 16. REMOVAL OF LEANING YOUNG DISEASED OAK TO CULTIVATE GROWTH OF HEMLOCKS
 17. AREA OF LOOSE PERMEABLE PAVING /PAVERS INSTALLED. EXTENDING THE DRIVEWAY
 18. HEMLOCKS ON PROPERTY TO BE TREATED
 19. REFER TO FRAMING PLANS FOR NUMBER OF FOOTINGS FOR NEW DECKS
 20. INSTALLED PADS/FOOTINGS UNDER HVAC & ABOVE GROUND GAS TANK
 21. 10 FEET PERFORATED PIPE FOR GUTTER RUNOFF PLACED IN GRAVEL/PERMEABLE PAVING
 22. TEMP STORAGE FOR DUMPSTER & LUMBER

- CONSTRUCTION GENERAL NOTES**
1. LINE INDICATES PLACEMENT OF FIRST AND SECONDARY WATTLE BARRIER ————
 2. EXCAVATED MATERIAL FROM BASEMENT WHEEL BARROWED OUT TO DUMP TRUCK AND REMOVED FROM PROPERTY
 3. EXCAVATED SONOTUBES MATERIAL PLACED ON TARP AND WRAPPED, NOT UNWRAPPED UNTIL SONOTUBES ARE BEING BACK FILLED

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1309 SASSAQUIN AVE- COMPLETE RENO

1309 SASSAQUIN AVENUE,
NEW BEDFORD, MA 02745

J. ABRA DEGBOR & PETER N. SILVA

ARCHITECT:

ARCHITECTURE ■ SALEM, MA 01970
 RESIDENTIAL DESIGN 50 GROVE ST. SUITE 226
 PLANNING SALEM, MA 01970
 INTERIOR DESIGN TEL: 978.498.4370
 TEL: 978.818.5109
 CEL: 774.317.0491

CIVIL ENGINEER:
FARLAND CORP.
 21 VENTURA DRIVE,
 DARTMOUTH, MA 02747
 TEL: 508-717-3479

GENERAL CONSTRUCTOR:
MR. JIM O'MARA
 38 LAKE DRIVE,
 SOUTH PLYMOUTH, MA 02360
 TEL: 508-221-0177

REVISION:

NO.	DATE	DESCRIPTION
1	09.29.2022	PERMIT SET

DRAWING TITLE:
PROPOSED SITE PLAN

DRAWN BY:
GL

CHECKED BY:
MS

SCALE:
As indicated

DATE:
09.29.2022

PROJECT NO.:
22270

SEAL:

DRAWING NO.:
A-100

Reference Permit Plans
Page A-100, Site Plan

Reference Landscape & Construction General Notes for
Narrative

Ref. Permit Plans
Page A-100, Site Plan
Landscape Notes

(#1)

(#2)

(#3)



Ref. Permit Plans
Page A-100, Site Plan
Landscape Notes

(#4)

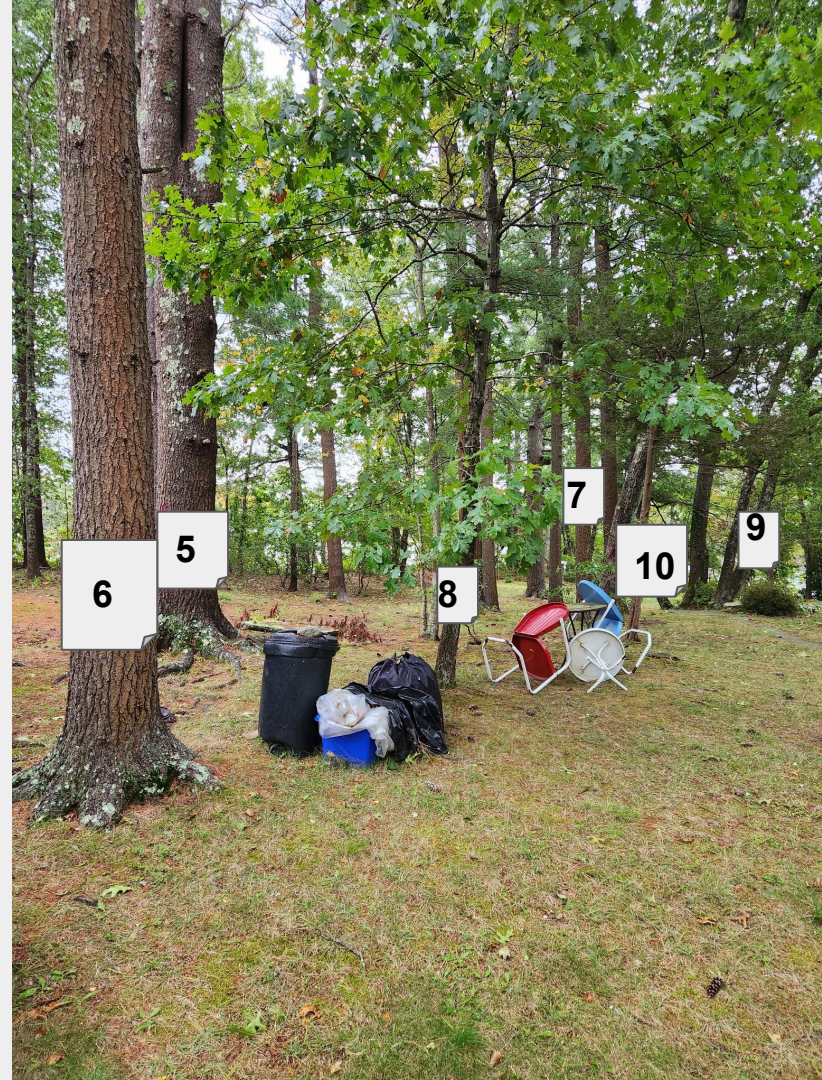
(#5)



Ref. Permit Plans Page A-100, Site Plan Landscape Notes

(#5)
(#6)

(#7)
(#8)
(#9)
(#10)



Ref. Permit Plans
Page A-100, Site Plan
Landscape Notes

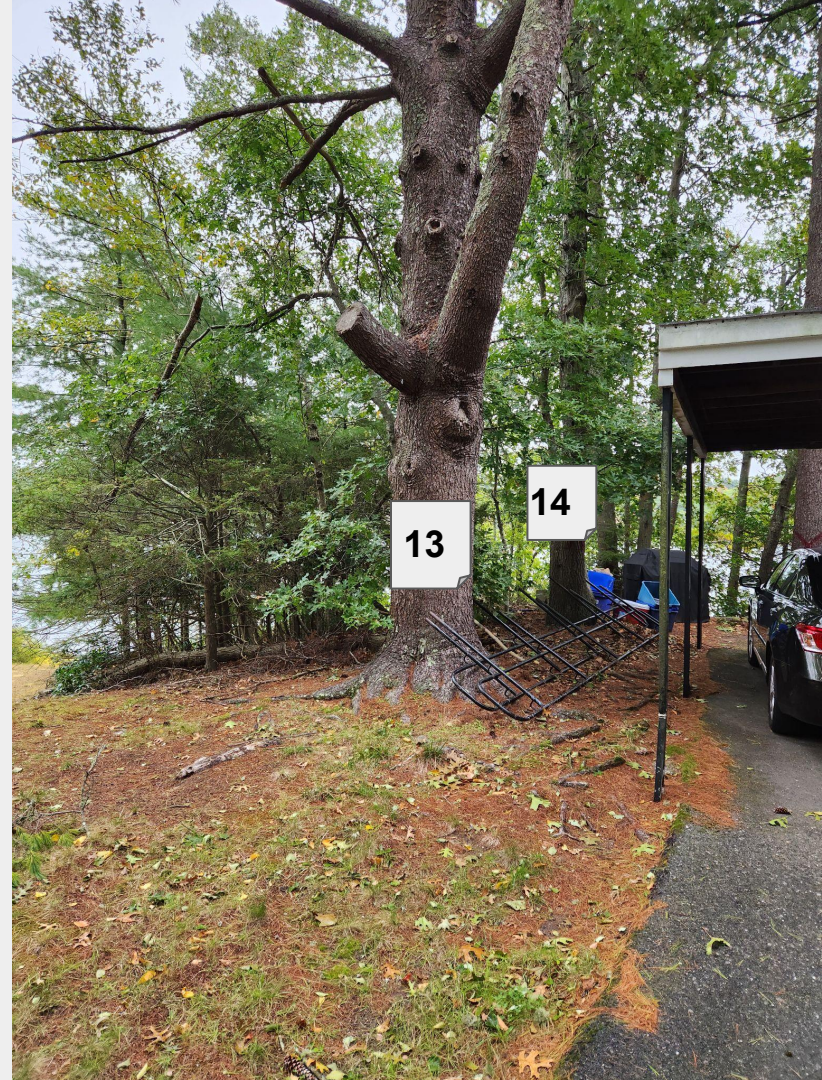
(#11)

(#12)



Ref. Permit Plans
Page A-100, Site Plan
Landscape Notes

(#13)
(#14)



Ref. Permit Plans
Page A-100, Site Plan
Landscape Notes

- (#14)
- (#15)
- (#16)



Ref. Permit Plans
Page A-100, Site Plan
Landscape Notes

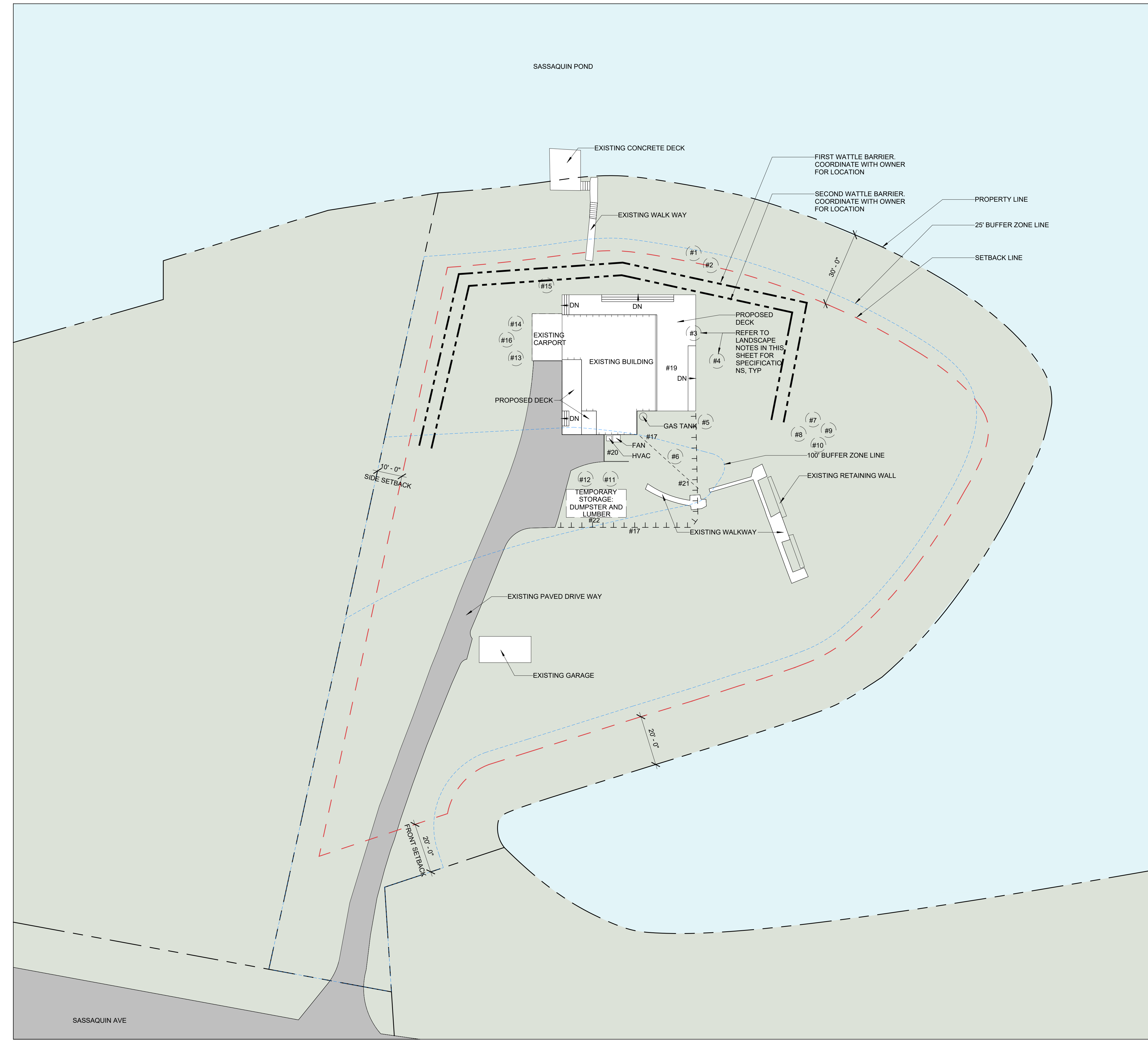
(#17) 

(#22)



LOCUS

- Site Plan
- TOPO Version 3.4.2
- Natural Heritage Endangered Species Program
 - National Flood Hazard Layer FIRMette
 - MassMappers



1 PROPOSED SITE PLAN
1" = 20'-0"

© 2022 Flow Design Inc.
N
North
Project

SURVEY INFORMATION BASED OF SURVEY PREPARED BY THOMPSON FARLAND

- LANDSCAPE GENERAL NOTES**
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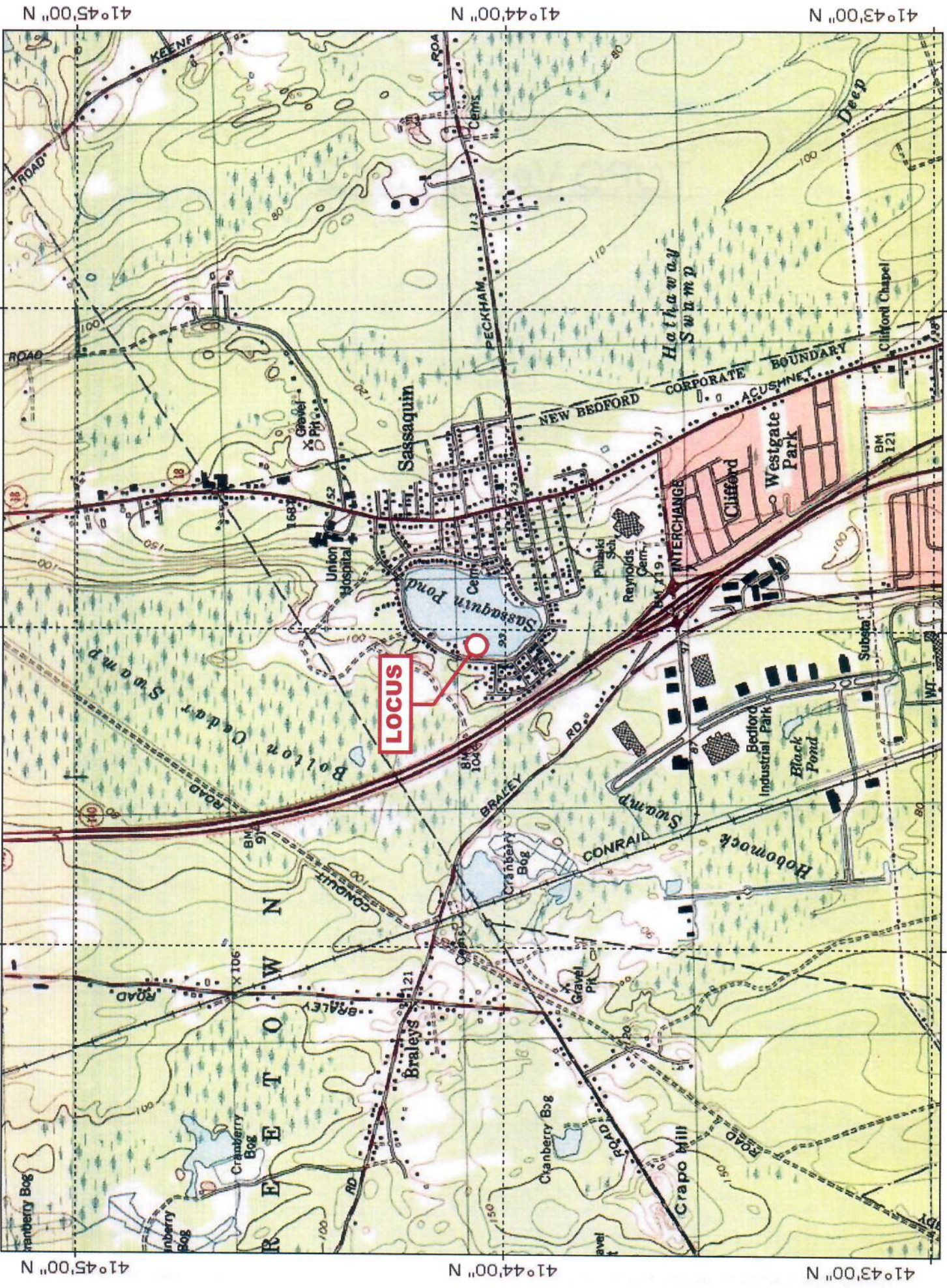
GENERAL CONSTRUCTOR:

MR. JIM O'MARA
38 LAKE DRIVE,
SOUTH PLYMOUTH, MA 02360
TEL: 508-221-0177

REVISION:		
NO.	DATE:	DESCRIPTION:
1	09.29.2022	PERMIT SET

DRAWING TITLE:
**PROPOSED SITE
PLAN**

DRAWN BY: GL	SEAL: 
CHECKED BY: MS	
SCALE: As indicated	
DATE: 09.29.2022	
PROJECT NO: 22270	DRAWING NO.:
	A-100



41°45'00" N

41°44'00" N

41°43'00" N

41°45'00" N

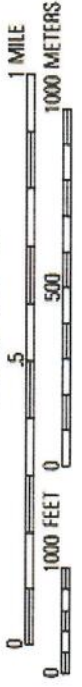
41°44'00" N

41°43'00" N

WGS84 70°56'00" W

70°57'00" W

70°58'00" W



MN 15 1/2 IN



LOCUS

PH 22

PH 1349

100 m
200 ft
Scale = 1:9,028
244,937.47m 832,012.60m



National Flood Hazard Layer FIRMette

70°57'21"W 41°44'18"N



Legend

SEE FIS REPORT FOR DETAILED LEGEND AND INDEX MAP FOR FIRM PANEL LAYOUT

SPECIAL FLOOD HAZARD AREAS	<p>Without Base Flood Elevation (BFE) <i>Zone A, V, A99</i></p> <p>With BFE or Depth Zone AE, AD, AH, VE, AR</p> <p>Regulatory Floodway</p>
OTHER AREAS OF FLOOD HAZARD	<p>0.2% Annual Chance Flood Hazard, Area of 1% annual chance flood with average depth less than one foot or with drainage areas of less than one square mile <i>Zone 7</i></p> <p>Future Conditions 1% Annual Chance Flood Hazard <i>Zone X</i></p> <p>Area with Reduced Flood Risk due to Levee. See Notes. <i>Zone X</i></p> <p>Area with Flood Risk due to Levee <i>Zone D</i></p>
OTHER AREAS	<p>NO SCREEN</p> <p>Area of Minimal Flood Hazard <i>Zone X</i></p> <p>Effective LOMRs</p> <p>Area of Undetermined Flood Hazard <i>Zone</i></p>
GENERAL STRUCTURES	<p>Channel, Culvert, or Storm Sewer</p> <p>Levee, Dike, or Floodwall</p>
OTHER FEATURES	<p>Cross Sections with 1% Annual Chance Water Surface Elevation</p> <p>Coastal Transect</p> <p>Base Flood Elevation Line (BFE)</p> <p>Limit of Study</p> <p>Jurisdiction Boundary</p> <p>Coastal Transect Baseline</p> <p>Profile Baseline</p> <p>Hydrographic Feature</p>
MAP PANELS	<p>Digital Data Available</p> <p>No Digital Data Available</p> <p>Unmapped</p>

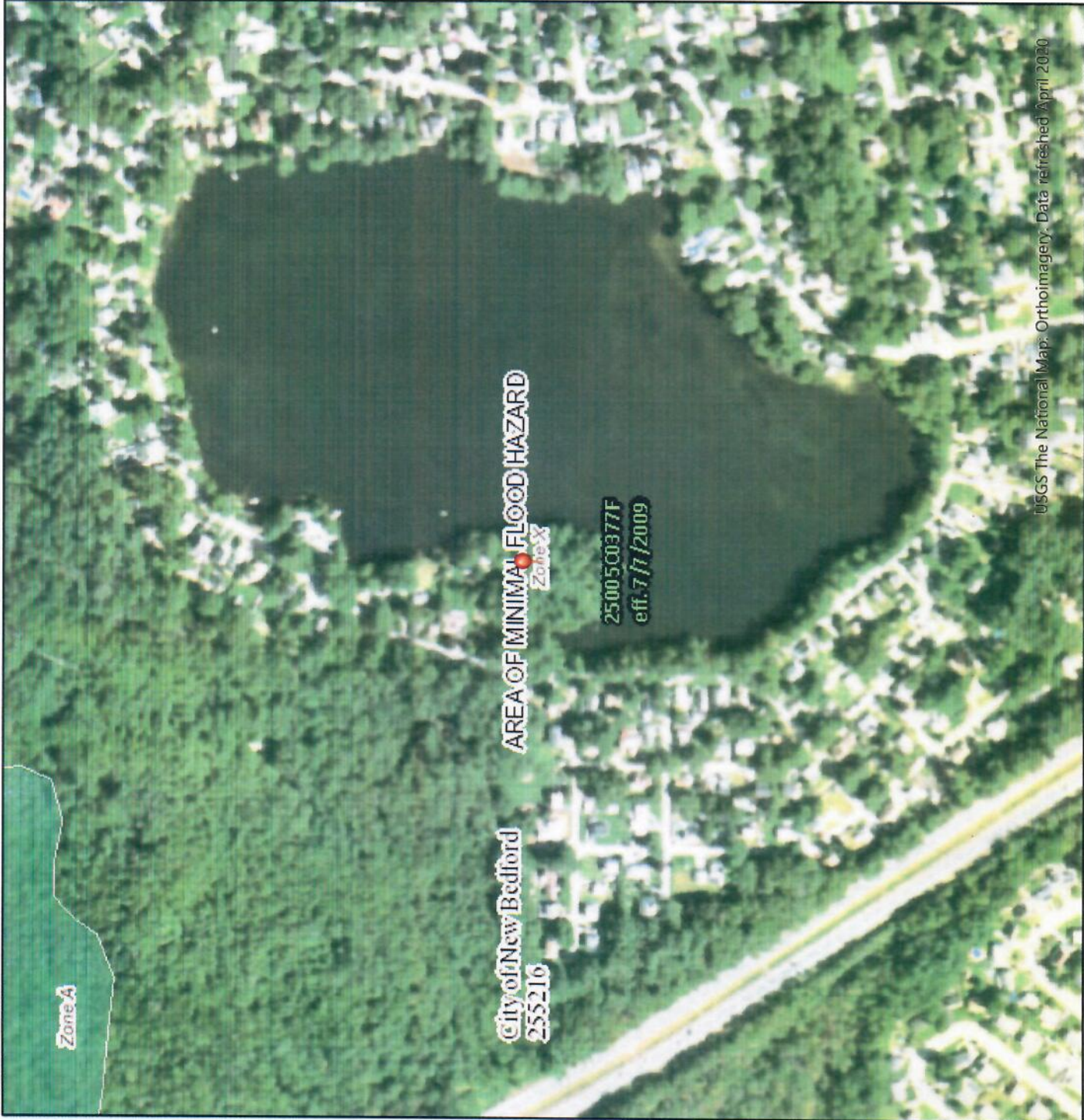


The pin displayed on the map is an approximate point selected by the user and does not represent an authoritative property location.

This map complies with FEMA's standards for the use of digital flood maps if it is not void as described below. The basemap shown complies with FEMA's basemap accuracy standards.

The flood hazard information is derived directly from the authoritative NFHL web services provided by FEMA. This map was exported on 9/11/2020 at 4:33 PM and does not reflect changes or amendments subsequent to this date and time. The NFHL and effective information may change or become superseded by new data over time.

This map image is void if the one or more of the following map elements do not appear: basemap imagery, flood zone labels, legend, scale bar, map creation date, community identifiers, FIRM panel number, and FIRM effective date. Map images for unmapped and unmodernized areas cannot be used for regulatory purposes.



USGS The National Map: Orthoimagery. Data refreshed April 2020

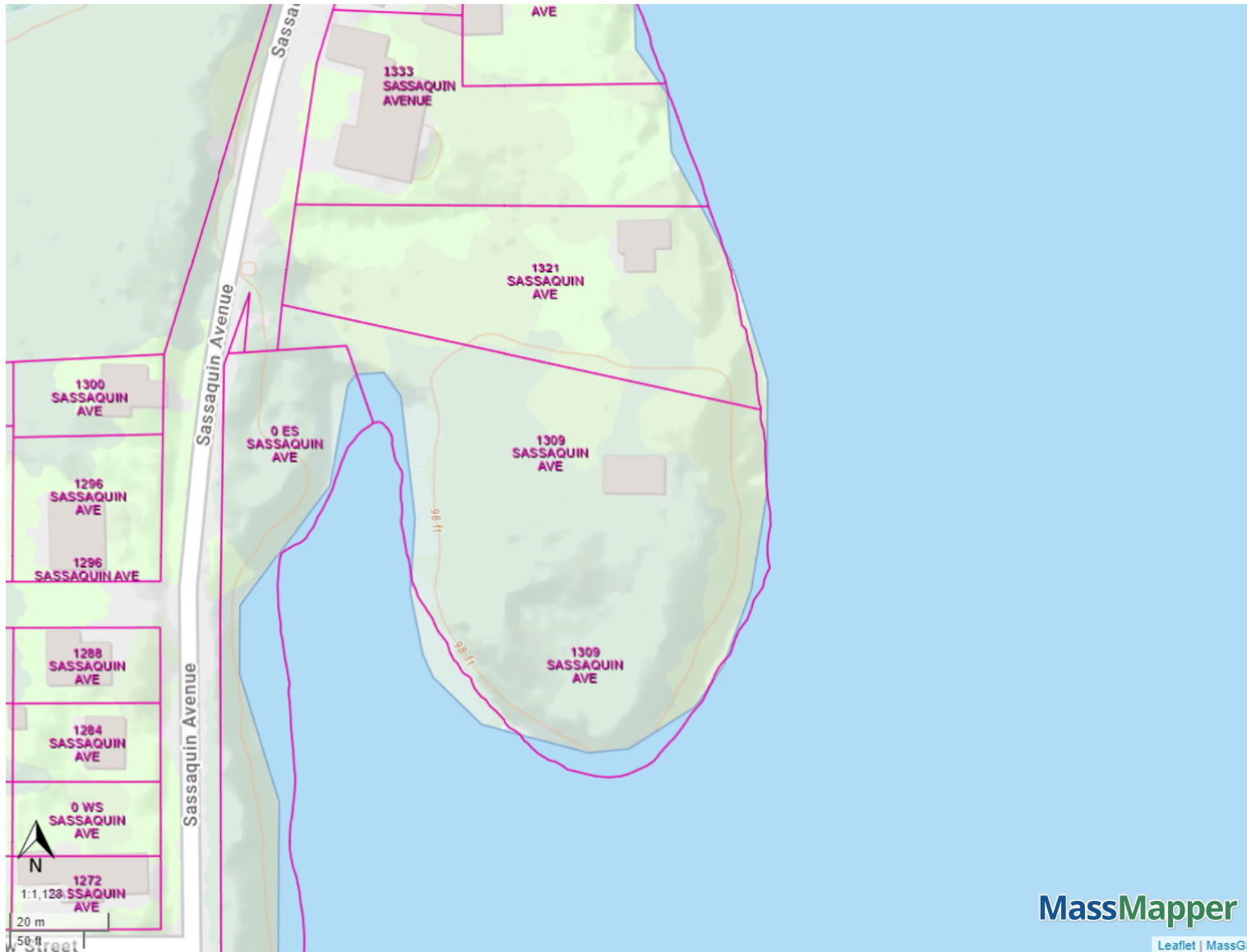
Feet

1:6,000

70°56'44"W 41°43'51"N

1309 Sassaquin Ave.

Property Tax Parcels



MassMapper

Leaflet | MassGIS

One (1) filled out
Local Fee Calculation
Worksheet with
check(s) or money order(s)

made payable to the City of New Bedford.



MAYOR
JON MITCHELL

City of New Bedford Conservation Commission • Department of Environmental Stewardship

133 William Street • Room 304 • New Bedford, Massachusetts 02740

Telephone: (508) 991.6188

Conservation • Environmental Stewardship • Resilience

CITY OF NEW BEDFORD, MASSACHUSETTS

CONSERVATION COMMISSION 2022 FILING FEE CALCULATION WORKSHEET*

PROJECT LOCATION: _____

MAP(S) _____ LOT(S) _____

APPLICANT: _____

CONSERVATION COMMISSION APPLICATION TYPE:

- () REQUEST FOR DETERMINATION OF APPLICABILITY
- () NOTICE OF INTENT
- () AMENDED ORDER OF CONDITIONS
- () EXTENSION PERMIT
- () CERTIFICATE OF COMPLIANCE

(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:

	AMOUNT DUE:
• Application and Field Review Fee (\$200.00)	\$ <u>200.00</u>
• \$0.50 X _____ SF Wetland Resource Area Fee shall not exceed \$2000.00 per project	\$ _____
• \$0.05 X _____ SF of Isolated Land Subject to Flooding, Bordering Land Subject to Flooding or Land Subject to Coastal Storm Flowage Fee shall not exceed \$500.00	\$ _____
• \$0.50 X _____ SF of altered 25' Riverfront Area Fee shall not exceed \$1,500.00	\$ _____
• \$1.00 X _____ SF of undeveloped 25' Riverfront Area Fee shall not exceed \$2000.00	\$ _____
• \$5.00 X _____ LF of Coastal or Inland Bank Fee shall not exceed \$750.00	\$ _____



- \$0.10 X _____ SF of Buffer Zone altered \$ _____
Fee shall not exceed \$6,500.00
- \$10.00 X _____ LF of dock \$ _____
- \$10.00 X _____ acres of aquaculture \$ _____

(B) EXTENSION OF AN ORDER OF CONDITIONS:

- Single family dwelling, or minor project (house addition, in ground pool dock etc.) = \$200.00 \$ _____
- Subdivision, commercial or industrial project = \$400.00 \$ _____

(C) AMENDING A PERMIT

- Single family dwelling or minor project (house addition, in ground pool dock etc.) = \$200.00 + new alteration fee – refer to (A) above \$ _____
- Subdivision, commercial or industrial project = \$500.00 + new alteration fee – refer to (A) above \$ _____

(D) WETLAND DELINEATION VERIFICATION (with or without proposed alteration)

- ½ acre or less
- ½ acre to 2 acres = \$500.00 (\$100/acre thereafter) not to exceed \$3,500 \$ _____

(E) LEGAL AD FEE (fee set by local newspaper, subject to market price) \$ 250.00

(F) CERTIFICATES OF COMPLIANCE

- One new house = \$250.00 \$ _____
- One activity at an existing house = \$150.00 \$ _____
- Residential or Commercial docks = \$200.00 \$ _____
- Commercial & Industrial Facilities = \$1,500.00 \$ _____
- New Roadways & Associated Stormwater Mgt. Systems = \$1,500.00 \$ _____

Partial Certificates of Compliance have the same fee as a Certificate of Compliance, But you only pay the fee once (you do not pay double to obtain a full Certificate of Compliance).

(G) AFTER THE FACT FILING FEE

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

TOTAL AMOUNT DUE: \$ _____

Notes:

*Please refer to the Conservation Commission fee schedule – dated 02/2020

Please make check or Money Order payable to the City of New Bedford
Cash is not accepted.



Abutters' Notice

**NOTIFICATION TO ABUTTERS UNDER THE CITY OF NEW BEDFORD WETLANDS
ORDINANCE AND THE MA WETLANDS PROTECTION ACT**

In accordance with the City of New Bedford Wetlands Ordinance (New Bedford Code of Ordinances Sections 15-101 through 15-112) and the MA Wetlands Protection Act (M.G.L. c. 131 S.40) you are hereby notified of the following:

The name of the applicant is: **J. Abra Degbor & Peter N. Silva**

The applicant has filed a Notice of Intent for the municipality of New Bedford, Massachusetts seeking permission to remove, fill, dredge or alter an area subject to protection under the City of New Bedford Wetlands Ordinance and MA Wetlands Protection Act.

The address of the lot where the activity is proposed is: **1309 Sassaquin Ave. New Bedford MA 02745** Assessors Map **138** ; Lot **413**

Copies of the Notice of Intent may be examined at the New Bedford Conservation Commission, Room 304 – City Hall, 133 William St. New Bedford, MA 02740 between the hours of 8:00 AM and 4:00 PM, Monday through Friday. For more information contact the New Bedford Conservation Commission at 508-991-6188.

Copies of the Notice of Intent may be obtained from either (check one) the applicant or the applicant's representative by calling this telephone number **508.995.1488** between the hours of 8:00 AM and 4:00 PM Monday through Friday.

Information regarding the date, time and place of the Public Hearing may be obtained from the New Bedford Conservation Commission by calling 508-991-6188 between the hours of 8:00 AM and 4:00 PM Monday through Friday.

Note: Notice of the Public Hearing, including its date, time and place will be posted in the City Hall not less than forty eight (48) hours in advance of the meeting.

Note: Notice of the Public Hearing including its date, time and place will be published at least five (5) days in advance of the Public Hearing in the Standard Times newspaper.

Note: You may also contact the New Bedford Conservation Commission at 508-991-6188 for more information about this publication, the City of New Bedford Wetlands Ordinance or the MA Wetlands Protection Act.

One (1) 'Certified Abutters List'

(follow directions on the form)



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 #	138
LOT(S)#	413
ADDRESS:	1309 Sassaquin Ave, New Bedford Ma 02745
OWNER INFORMATION	
NAME:	Peter N. Silva "Trustee" & Joyceln A Degbot "trustee"
MAILING ADDRESS:	1309 Sassaquin Ave New Bedford, MA 02745
APPLICANT/CONTACT PERSON INFORMATION	
NAME (IF DIFFERENT):	J. Abra Degbor
MAILING ADDRESS (IF DIFFERENT):	
TELEPHONE #	617-999-3783
EMAIL ADDRESS:	Degbor.silva2@comcast.net
REASON FOR THIS REQUEST: Check appropriate	
<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 Department of City Planning, Room 303 in City Hall, 133 William Street, or Email to Angela.Goncalves@newbedford-ma.gov. The applicant is 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. Motte

Printed Name

Signature

09/19/2022

Date

Amount Due

\$5.00

Date Paid

09/20/2022

Confirmation Number

Cash

September 19, 2022

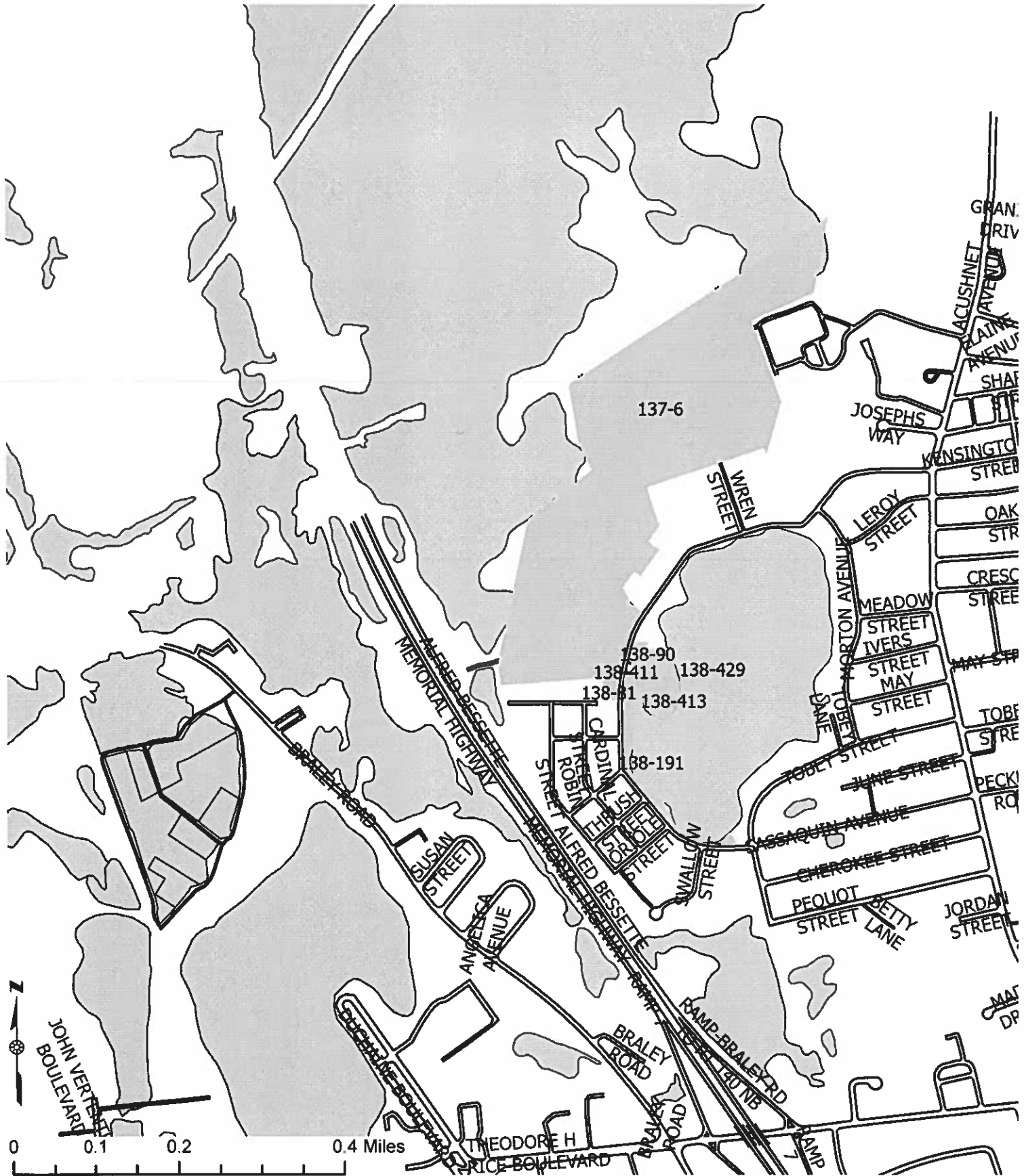
Dear Applicant,

Please find below the List of Abutters within 100 feet of the property known as 1309 Sassaquin Avenue (Map: 138, Lot: 413). 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
138-411	ES SASSAQUIN AVE	SLH PROPERTY INC, C/O SOUTHCOAST VENTURES INC 101 PAGE STREET NEW BEDFORD, MA 02740
138-90	1333 SASSAQUIN AVE	COSTA DAVID, COSTA ANN P L 1333 SASSAQUIN AVENUE NEW BEDFORD, MA 02745
138-83	1300 SASSAQUIN AVE	GENEREUX JANICE 1300 SASSAQUIN AVE NEW BEDFORD, MA 02745
138-191	ES SASSAQUIN AVE	FREY MICHAEL F "TRUSTEE", MANDEVILLE ROBERT G "TRUSTEE", ANDREWS, JACQUELINE "TRUSTEE" 1479 MORTON AVE NEW BEDFORD, MA 02745
138-413	1309 SASSAQUIN AVE	SILVA PETER N "TRUSTEE", DEGBOR JOYCELYN A "TRUSTEE", THE DEGBOR-SILVA FAMILY, REVOCABLE TRUST, 1309 SASSAQUIN AVE NEW BEDFORD, MA 02745
137-6	NS SASSAQUIN AVE	SLH PROPERTY INC, C/O SOUTHCOAST VENTURES INC 101 PAGE STREET NEW BEDFORD, MA 02740
138-429	1321 SASSAQUIN AVE	NICHOLSON ERNEST, NICHOLSON MARY LOU 1321 SASSAQUIN AVE NEW BEDFORD, MA 02745

Note: This map was developed using the best available data and serves as a guide rather than a determination. Data should be confirmed in the field to ensure accuracy.



City of New Bedford, Massachusetts
Department of City Planning

Parcels within 100FT

- Road Edge
- Water
- Street Names
- 138-413

All the abutters on the list must
be sent via Certified Mail the
'Abutters Notice' –

Notice template is available on the NB Conservation
Commission webpage

7021 2720 0003 2996 5934

U.S. Postal Service™
CERTIFIED MAIL® RECEIPT
Domestic Mail Only

For delivery information, visit our website at www.usps.com®.

New Bedford, MA 02745

Certified Mail Fee	\$4.00	0745
\$	\$3.25	08
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	\$0.60	
\$	\$7.85	
Total Postage and Fees		
\$		



Sent To
Street and Apt. No., c
COSTA DAVID, COSTA ANN P L
1333 SASSAQUIN AVENUE
City, State, ZIP+4®
NEW BEDFORD, MA 02745

PS Form 3800, April 2012

7021 2720 0003 2996 5885

U.S. Postal Service™
CERTIFIED MAIL® RECEIPT
Domestic Mail Only

For delivery information, visit our website at www.usps.com®.

New Bedford, MA 02745

Certified Mail Fee	\$4.00	0745
\$	\$3.25	08
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	\$0.60	
\$	\$7.85	
Total Postage and Fees		
\$		



Sent To
Street:
NICHOLSON ERNEST, NICHOLSON MARY LOU
City, St:
1321 SASSAQUIN AVE
NEW BEDFORD, MA 02745

PS Form 3800, April 2012

7021 2720 0003 2996 5908

U.S. Postal Service™
CERTIFIED MAIL® RECEIPT
Domestic Mail Only

For delivery information, visit our website at www.usps.com®.

New Bedford, MA 02745

Certified Mail Fee	\$4.00	0745
\$	\$3.25	08
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	\$0.60	
\$	\$7.85	
Total Postage and Fees		
\$		



Sent To
SILVA PETER N "TRUSTEE", DEGBOR JOYCELYN A "TRU"
1309 SASSAQUIN AVE
NEW BEDFORD, MA 02745

7021 2720 0003 2996 5878

U.S. Postal Service™
CERTIFIED MAIL® RECEIPT
Domestic Mail Only

For delivery information, visit our website at www.usps.com®.

New Bedford, MA 02740

Certified Mail Fee	\$4.00	0745
\$	\$3.25	08
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	\$0.60	
\$	\$7.85	
Total Postage and Fees		
\$		



Sent To
SLH PROPERTY INC, C/O SOUTHCOAST VENTURES INC
101 PAGE STREET (137-6)
NEW BEDFORD, MA 02740

7021 2720 0003 2996 5915

U.S. Postal Service™
CERTIFIED MAIL® RECEIPT
Domestic Mail Only

For delivery information, visit our website at www.usps.com®.

New Bedford, MA 02745

Certified Mail Fee	\$4.00	0745
\$	\$3.25	08
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	\$0.60	
\$	\$7.85	
Total Postage and Fees		
\$		



Sent To
ANDREWS, JACQUELINE "TRUSTEE"
FREY MICHAEL F "TRUSTEE", MANDEVILLE ROBERT G "
1479 MORTON AVE

7021 2720 0003 2996 5922

U.S. Postal Service™
CERTIFIED MAIL® RECEIPT
Domestic Mail Only

For delivery information, visit our website at www.usps.com®.

New Bedford, MA 02745

Certified Mail Fee	\$4.00	0745
\$	\$3.25	08
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	\$0.60	
\$	\$7.85	
Total Postage and Fees		
\$		



Sent To
City:
GENEREUX JANICE
1300 SASSAQUIN AVE
NEW BEDFORD, MA 02745

Instructions

**U.S. Postal Service™
CERTIFIED MAIL® RECEIPT**

Domestic Mail Only

For delivery information, visit our website at www.usps.com®.

New Bedford, MA 02740

Certified Mail Fee	\$4.00
Extra Services & Fees (check box, add fee as appropriate)	\$3.25
<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	\$0.60
Total Postage and Fees	\$7.85

0745
08
Postmark Here
SEP 27 2022
09/27/2022

Sent To
SLH PROPERTY INC, C/O SOUTHCOAST VENTURES INC
101 PAGE STREET (138-411)
NEW BEDFORD, MA 02740

First-Class Mail® Letter	1	\$0.60
New Bedford, MA 02745 Weight: 0 lb 0.60 oz Estimated Delivery Date Thu 09/29/2022		
Certified Mail® Tracking #:		\$4.00
70212720000329965915		
Return Receipt Tracking #:		\$3.25
9590 9402 7269 1284 0064 89		
Total		\$7.85
First-Class Mail® Letter	1	\$0.60
New Bedford, MA 02745 Weight: 0 lb 0.60 oz Estimated Delivery Date Thu 09/29/2022		
Certified Mail® Tracking #:		\$4.00
70212720000329965922		
Return Receipt Tracking #:		\$3.25
9590 9402 7269 1284 0064 72		
Total		\$7.85
First-Class Mail® Letter	1	\$0.60
New Bedford, MA 02740 Weight: 0 lb 0.60 oz Estimated Delivery Date Thu 09/29/2022		
Certified Mail® Tracking #:		\$4.00
70212720000329965892		
Return Receipt Tracking #:		\$3.25
9590 9402 7269 1284 0065 02		
Total		\$7.85
First-Class Mail® Letter	1	\$0.60
New Bedford, MA 02745 Weight: 0 lb 0.60 oz Estimated Delivery Date Thu 09/29/2022		
Certified Mail® Tracking #:		\$4.00
70212720000329965939		
Return Receipt Tracking #:		\$3.25
9590 9402 7269 1284 0064 65		
Total		\$7.85
Grand Total:		\$54.95



MOUNT PLEASANT
748 MOUNT PLEASANT ST
NEW BEDFORD, MA 02745-9998
(800)275-8777

09/27/2022 04:23 PM

Product	Qty	Unit Price	Price
First-Class Mail® Letter	1		\$0.60
New Bedford, MA 02745 Weight: 0 lb 0.60 oz Estimated Delivery Date Thu 09/29/2022			
Certified Mail® Tracking #:			\$4.00
70212720000329965885			
Return Receipt Tracking #:			\$3.25
9590 9402 7269 1284 0065 19			
Total			\$7.85
First-Class Mail® Letter	1		\$0.60
New Bedford, MA 02740 Weight: 0 lb 0.60 oz Estimated Delivery Date Thu 09/29/2022			
Certified Mail® Tracking #:			\$4.00
70212720000329965878			
Return Receipt Tracking #:			\$3.25
9590 9402 7269 1284 0065 26			
Total			\$7.85
First-Class Mail® Letter	1		\$0.60
New Bedford, MA 02745 Weight: 0 lb 0.60 oz Estimated Delivery Date Thu 09/29/2022			
Certified Mail® Tracking #:			\$4.00
70212720000329965908			
Return Receipt Tracking #:			\$3.25
9590 9402 7269 1284 0064 96			
Total			\$7.85

2692 2720 0003 2996 5892

Return the Certified Mail Receipt(s) (PS Form 3800) from the U.S. Postal Service

As proof of the Abutters Notice mailing sent out on time (scanned and sent & delivered).

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

NICHOLSON ERNEST, NICHOLSON MARY LOU
 1321 SASSAQUIN AVE
 NEW BEDFORD, MA 02745



2. Article Number (Transfer from service label)
 7021 2720 0003 2996 5885

PS Form 3811, July 2020 PSN 7530-02-000-9053

137-6

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

SLH PROPERTY INC, C/O SOUTHCOAST VENTURES INC
 101 PAGE STREET
 NEW BEDFORD, MA 02740



2. Article Number (Transfer from service label)
 7021 2720 0003 2996 5878

PS Form 3811, July 2020 PSN 7530-02-000-9053

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent
 Addressee

B. Received by (Printed Name) _____

C. Date of Delivery _____

D. Is delivery address different from item 1? Yes
 If YES, enter delivery address below: No

NICHOLSON ERNEST, NICHOLSON MARY LOU
 1321 SASSAQUIN AVE
 NEW BEDFORD, MA 02745

3. Service Type
 Adult Signature
 Adult Signature Restricted Delivery
 Certified Mail®
 Certified Mail Restricted Delivery
 Collect on Delivery
 Collect on Delivery Restricted Delivery
 Insured Mail Restricted Delivery (over \$500)

Priority Mail Express®
 Registered Mail™
 Registered Mail Restricted Delivery
 Signature Confirmation™
 Signature Confirmation Restricted Delivery

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent
 Addressee

B. Received by (Printed Name) _____

C. Date of Delivery _____

D. Is delivery address different from item 1? Yes
 If YES, enter delivery address below: No

SLH PROPERTY INC, C/O SOUTHCOAST VENTURES INC
 101 PAGE STREET
 NEW BEDFORD, MA 02740

3. Service Type
 Adult Signature
 Adult Signature Restricted Delivery
 Certified Mail®
 Certified Mail Restricted Delivery
 Collect on Delivery
 Collect on Delivery Restricted Delivery
 Insured Mail Restricted Delivery (over \$500)

Priority Mail Express®
 Registered Mail™
 Registered Mail Restricted Delivery
 Signature Confirmation™
 Signature Confirmation Restricted Delivery

Domestic Return Receipt

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

COSTA DAVID, COSTA ANN P L
 1333 SASSAQUIN AVENUE
 NEW BEDFORD, MA 02745



2. Article Number (Transfer from service label)
 7021 2720 0003 2996 5939

PS Form 3811, July 2020 PSN 7530-02-000-9053

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

SILVA PETER N "TRUSTEE", DEGBOR JOYCELYN A "TRUSTEE"
 1309 SASSAQUIN AVE
 NEW BEDFORD, MA 02745



2. Article Number (Transfer from service label)
 7021 2720 0003 2996 5908

PS Form 3811, July 2020 PSN 7530-02-000-9053

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent
 Addressee

B. Received by (Printed Name) _____

C. Date of Delivery _____

D. Is delivery address different from item 1? Yes
 If YES, enter delivery address below: No

COSTA DAVID, COSTA ANN P L
 1333 SASSAQUIN AVENUE
 NEW BEDFORD, MA 02745

3. Service Type
 Adult Signature
 Adult Signature Restricted Delivery
 Certified Mail®
 Certified Mail Restricted Delivery
 Collect on Delivery
 Collect on Delivery Restricted Delivery
 Insured Mail Restricted Delivery (over \$500)

Priority Mail Express®
 Registered Mail™
 Registered Mail Restricted Delivery
 Signature Confirmation™
 Signature Confirmation Restricted Delivery

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent
 Addressee

B. Received by (Printed Name) _____

C. Date of Delivery _____

D. Is delivery address different from item 1? Yes
 If YES, enter delivery address below: No

SILVA PETER N "TRUSTEE", DEGBOR JOYCELYN A "TRUSTEE"
 1309 SASSAQUIN AVE
 NEW BEDFORD, MA 02745

3. Service Type
 Adult Signature
 Adult Signature Restricted Delivery
 Certified Mail®
 Certified Mail Restricted Delivery
 Collect on Delivery
 Collect on Delivery Restricted Delivery
 Insured Mail Restricted Delivery (over \$500)

Priority Mail Express®
 Registered Mail™
 Registered Mail Restricted Delivery
 Signature Confirmation™
 Signature Confirmation Restricted Delivery

Domestic Return Receipt

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

FREY MICHAEL F "TRUSTEE", MANDEVILLE ROBERT G "TRUSTEE"
1479 MORTON AVE
NEW BEDFORD, MA 02745



2. Article Number (Transfer from service label)
7021 2720 0003 2996 5915

PS Form 3811, July 2020 PSN 7530-02-000-9053

Domestic Return Receipt

138-411

COMPLETE THIS SECTION ON DELIVERY

- Complete items 1, 2, and 3.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

SLH PROPERTY INC, C/O SOUTHCOAST VENTURES INC
101 PAGE STREET
NEW BEDFORD, MA 02740



2. Article Number (Transfer from service label)
7021 2720 0003 2996 5892

PS Form 3811, July 2020 PSN 7530-02-000-9053

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

- Complete items 1, 2, and 3.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

GENEREUX JANICE
1300 SASSAQUIN AVE
NEW BEDFORD, MA 02745



2. Article Number (Transfer from service label)
7021 2720 0003 2996 5922

PS Form 3811, July 2020 PSN 7530-02-000-9053

Domestic Return Receipt

A. Signature

Adult Signature Restricted Delivery
 Certified Mail®
 Collect on Delivery
 Collect on Delivery Restricted Delivery

B. Received by (Printed Name)
Michael Kelly
 C. Date of Delivery
9/29/02

D. Is delivery address different from item 1? Yes No

3. Service Type

Priority Mail Express®
 Registered Mail™
 Registered Mail Restricted Delivery
 Adult Signature Restricted Delivery
 Certified Mail®
 Collect on Delivery
 Collect on Delivery Restricted Delivery

Mail Restricted Delivery (over \$500)

Domestic Return Receipt

A. Signature

Adult Signature Restricted Delivery
 Certified Mail®
 Collect on Delivery
 Collect on Delivery Restricted Delivery

B. Received by (Printed Name)
Michael Kelly
 C. Date of Delivery
9/29/02

D. Is delivery address different from item 1? Yes No

3. Service Type

Priority Mail Express®
 Registered Mail™
 Registered Mail Restricted Delivery
 Adult Signature Restricted Delivery
 Certified Mail®
 Collect on Delivery
 Collect on Delivery Restricted Delivery

Mail Restricted Delivery (over \$500)

Domestic Return Receipt

The Legal Ad must be posted a minimum
of 5 business days
before the date of your
application hearing.

The Legal Ad is provided to the local newspaper (The Standard Times) payment made to New Bedford Conservation Commission.

**Email this entire packet as a PDF to the
Conservation Agent – Chance Perks
(mailto:chancery.perks@newbedford-ma.gov)
as well as the
Office Administrator - Teresa Alves
(mailto:teresa.alves@newbedford-ma.gov).**

Please do not include scans of
checks or personally identifiable information in these files.