X. HOMEOWNER LICENSE EXEMPTION					
Supplement #1 The current exemption for "homeowner" was extended to include ewner-occupied dwellings of two units or less and to allow the current exemption for "homeowner" was extended to include ewner-occupied dwellings of two units or less and to allow the current exemption for "homeowner" was extended to include ewner-occupied dwellings of two units or less and to allow the current exemption for "homeowner" was extended to include ewner-occupied dwellings of two units or less and to allow the current exemption for "homeowner" was extended to include ewner-occupied dwellings of two units or less and to allow the current exemption for "homeowner" was extended to include ewner-occupied dwellings of two units or less and to allow the current exemption for "homeowner" was extended to include ewner-occupied dwellings of two units or less and to allow the current exemption for "homeowner" was extended to include ewner-occupied dwellings of two units or less and to allow the current exemption for the exemption of t	w such homeowners to 3e Section 110.5)				
DEFINITION OF HOMEOWNER:  Person(s) who own a parcel of land on which he/she resides or intends to reside, on which there is, or is intended to be, a one to two family dwelling. Person(s) who own a parcel of land on which he/she resides or intends to reside, on which there is, or is intended to be, a one to two family dwelling. Person who constructs more than one home in a two-year period shall not be considered a homeowner. Such "homeowner shall submit to the Building Official, on a form acceptable to the Building Official, that he/she shall be considered a homeowner. Such "homeowner shall submit to the Building Official, on a form acceptable to the Building Official, that he/she shall be considered a homeowner. Such work performed under the building permit. (Section 110.5)					
The undersigned "homeowner assumes responsibility for compliance with the State Building Code and other applicable codes, ordinan and will comply with the City of New Bedford Building Department minimum inspection procedures and requirements.	ce, ruies and regulations,				
HOMEOWNERS SIGNATURE CAMERAL & CAMER					
X. CONSTRUCTION DEBRIS DISPOSAL					
Supplement #2 In accordance with provisions of Massachusetts General Law C40, S54, debris resulting form this work shall be disposed of in a project of the accordance with provisions of Massachusetts General Law C 111, S 150A	perly licensed solid waste				
The debris will be disposed of in: (Location of Facility)					
Signature of Permit Applicant Oate					
XI. HOME IMPROVEMENT CONTRACTOR LAW AFFIDAVIT					
Residential Use Only) Supplement to Permit Application Supplement #3 MGLc, 142 A requires that the "reconstruction, alteration, renovation, repair, modernization, conversion, improvement, MGLc, 142 A requires that the "reconstruction of an addition to any pre-existing owner-occupied building containing at least one but not more than a construction of an addition to any pre-existing owner-occupied building be conducted by registered contractors, with certain excited a structures which are adjacent to such residence of building be conducted by registered contractors, with certain excited and the such residence of building be conducted by registered contractors.  Type of Work:  Least a Garage  Est. Cost  Address of Work	, OOO				
Owner Name: Date of Permit Application:					
i hereby certify that: Registration is not required for the following reason(s):  Work excluded by law Job under \$1,000 Building not owner-occupied Own	ner obtaining own permit				
Other (specify)					
Notice is hereby given that: OWNERS OBTAINING THEIR OWN PERMIT OR EMPLOYING UNREGISTERED CONTRACTORS FOR APPLICABLE HOME DO NOT HAVE ACCESS TO THE ARBITRATION PROGRAM OF GUARANTY FUND UNDER MGLC. 142A.	IMPROVEMENT WORK				
signed under penalties of perjury: I hereby apply for a permit as the agent of the owner:					
Date Contractor Signature Regi	stration No.				
OR: Notwithstanding the above notice, I hareby apply for a permit as the owner of the above property:					
Date Owner Signature					
XII. BUILDING COMMISSIONERS REVIEW COMMENTS AND CONDITIONS	Fae				
C. Building Permit Rejected XVARIANCE Rejection Date 6/30 / 20 15	ree				
Reason For Rejection:	Permit #				
SEE ATTACHMENTS					
Comments and Conditions:					
-()	· · · · · · · · · · · · · · · · · · ·				
Signed A auny 1 Monoward Date:	20				
Title Salding Commissioner  Not valid unless signed (not stemped) by Building Commissioner					
NA VALIA HINIASS SIGNED INCI STRAINPRINT OF DURANTIS OFFICE					

## OTHER APPLICABLE REVIEWS K. FLOODPLAIN

	Is location within flood hazard area? yes (no)
	If yes, zone : and base elevation
L. W	ETLANDS PROTECTION
	Is location subject to flooding?
	Is location part of a known wetland?
	Has local conservation commission reviewed this site?

OWNER OR LESSEE NAME	MAILING ADDRESS	ZIP CODE	TELEPHONE NO	
Gmeron A. Crocks	3532 Account cive	02745	(500)5580953	
CONTRACTOR NAME	MAILING ADDRESS	ZIP CODE	TELEPHONE NO	
ARCHITECT NAME	MAILING ADDRESS	HOME IMP 4  ZIP CODE  LICENSE 9	TELEPHONE NO	
		, Deliver v		
NATURE OF OWNER	APPLICANT SIGNATURE		DATE	

Omission of reference to any provision shall not nullify any

requirement of this code nor exempt any structure from such requirement.

The applicants understands and warrant that they will comply with all pertinent federal and state statutes, local ordinances and all federal, state, and local regulations, including those of the Architectural Barriers board, Department of Environmental Protection Agency and may be forwarded for review to all pertinent local city agencies which may express specific concerns. It is understood that the issuance of a permit shall not serve as an acceptance or acknowledgment of compliance nor exempt any structure from such requirement. The permit shall be a license to proceed with the work and shall not be construed as authority to violate, cancel, or set aside any of the provisions of the State Building Code or local code of ordinances, except as specifically stipulated by modification or legally granted variation in accordance with Section 122.0 of State Building Code or local code of ordinances.

I have read the above and sign under pain and penalty of perjury as to the truth of all of the information and statements contained in sections I through IV of this application.

Concert & Cust 3532 accessinet are den Bed God
Applicant's Signature Address City

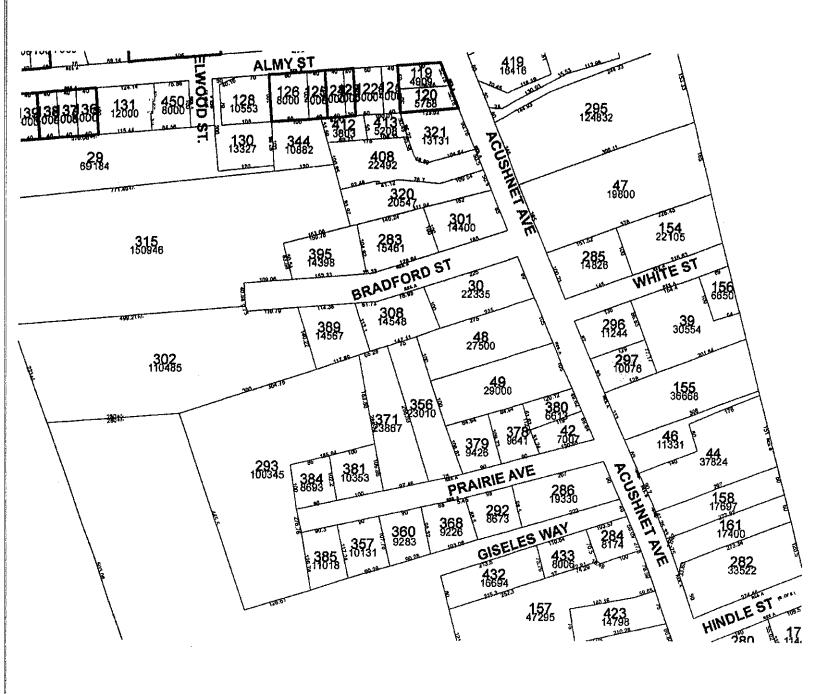
	CHECK	DATE OBTAINED	BY
Electrical			
Plumbing			1
Fire Department	1		
Water	1		
Planning			
Conservation	ļ		
Public Works			
Health			
Licensing			
Other			
VI. ZONING REVIEW			
DISTRICT:	USE:		
FRONTAGE: 80		LOT SIZE: 10,076	82 / 0.231 acres
SETBACKS:		<b>,</b>	
FRONT: 88'	LEFT SIDE: 3		6 REAR: 10
PERCENTAGE OF LOT	COVERAGE PRI	MARY BUILDING	
VARIANCE HISTORY			
VII. WORKER'S COMPI	Ensation insu	RANCE AFFIDAVIT	
(licensee/permittee) with		•	and the state of t
(City/State/Zlp) do hereby	<del>-</del>	and penalties of perjury, that: consation coverage for my emp	ployees working on this job.
The state of the s	<del>-</del>		ployees working on this job.
] I am an employer provide	ding worker's comp	Policy Number	ployees working on this job.
Insurance Company I am a sole proprietor a	ding worker's comp	Policy Number orking for me.	
Insurance Company I am a sole proprietor a	ding worker's comp and have no one wo general contractor,	Policy Number orking for me.	oloyees working on this job.
Insurance Company I am a sole proprietor a I am a sole proprietor, ave the following worker's	ding worker's comp and have no one wo general contractor,	Policy Number orking for me. or homeowner and have hired trance policies:	
Insurance Company Insurance Company I am a sole proprietor a I am a sole proprietor, ave the following worker's Name of contractor	ding worker's comp and have no one wo general contractor, compensation inst	Policy Number orking for me. or homeowner and have hiredurance policies:  Insurance Compa	d the contractors listed below who
Insurance Company I am a sole proprietor a I am a sole proprietor, ave the following worker's Name of contractor Name of contractor I am a homeowner perf	ding worker's comp and have no one wo general contractor, compensation inst	Policy Number orking for me. or homeowner and have hiredurance policies:  Insurance Compa	ny/policy number
Insurance Company I am a sole proprietor a I am a sole proprietor, ave the following worker's  Name of contractor  Name of contractor I am a homeowner perf E: Please be aware that why of not more than three unity considered to be employed where for a license or permit  erstand that a copy of this se verification and that failu	orming all the wornile homeowners whits in which the hore may evidence the tatement will be fore to secure coverane of up to \$1500.00	Policy Number Policy Number orking for me. or homeowner and have hiredurance policies:  Insurance Compa Insurance Compa k myself. ho employ persons to do main meowner also resides or on the ters' Compensation Act (GL. Clegal status of an employer underwarded to the Department of ge as required under Section 20 and/or imprisonment of up	d the contractors listed below who



## City of New Bedford . Massachusetts

1	FOR BUILDING DEPT. USE
I	
1	DATE RECEIVED:
ļ	RECEIVED BY:
ļ	ISSUED BY:

	Application	ling Department I for Plan Examin Building Permit	ation	SSUED BY:				
IMPORTANT — COMP	IMPORTANT — COMPLETE ALL ITEMS — MARK BOXES WHERE APPLICABLE — PRINT							
(AT LOCATION) 35	32 xicie Ac	Accushnet Lei An	10 Chite	S STACE TO				
	LOT 29	DISTRICT						
II. TYPE AND COST OF BUILDING	- all applicants	complete parts A thro	ugh D – PRINT					
A TYPE OF IMPROVEMENT		DI PROPOSED USE For	demotition most recent use	Nonresidential	]			
	į	Residential		19 Amusement,	recreational			
New Building  Addition (If residential, enter number	of new housing	13 One tamily  14 Two or more tam	ndu — Falei	20 Church, other	r religious			
units agged, it arry. at the	1	number of units		21 Industrial	,			
3 Alteration (if residential, enter numbe housing units added, if any, in Part D	r of new (, 14)	15 Transient holes, of dormitory — Ent	as number	22 Parking gare				
Repair, replacement		al unit	At 110011001		on, repair garage			
Company of the state of the sta	enter number of	15 Garage		24 Hospital, ins				
5 Demoktion (If multismity resources, units in building in Part D. 14, if non- indicate most recent use checking D		18 Other — Speci	۸	25 Office, bank				
6 Moving (relocation)		18 ( ) Ower - observe		26 Public utility				
7 Foundation only	į			'-	y, other educational			
		D.Z. Does this building con	lain asbestos?	28 Stores, men 29 Tanks, towe				
B. OWNERSHIP			es complete the following:	30 Funeral hor				
8 Private (individual, corporation, nonprofit institution, etc.)		Name & Address of As	Design Frankovan i	30 Food establ				
9 Public (Federal, State, or local gove	rnment)			32 Other — S				
C. COST	(Omit cents)		ion sent to DECE and the Industries and results of air	·	•			
C. COST  10. Cost of construction  To be installed but not included in the above cost  a. Electrical  b. Plumbing	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	D.3. Non-residential — De- machine shop, (aundr	sbestos removal is completed scribe in detail proposed un y building at hospital, elem king garage for department use of existing building is b	entary school, secondary	A DECEMBER OUTCOME			
c. Heating, air conditioning								
	11.000	-						
d. Other (elevator, etc.)  11. TOTAL VALUE OF CONSTRUCTION  12. TOTAL ASSESSED BLDG, VALUE	11/2000			demoktion complete on	Proacts G! H'& I.			
12. TOTAL ASSESSED BLDG. VALUE	O OF BUILDING	For new buildings con	npiete part E through t. for ns, alterations, repair, mov	ing, foundation), complete	e E through L			
III. SELECTED CHARACTERISTIC	2 OL BOILDING		J. DIMENSIONS		1			
E. PRINCIPAL TYPE OF FRAME	G. TYPE OF SEWAC	N private company	53 Number of stories		12.2			
33 Masonry (wall bearing)	i		54 Height 55 Total square lest of	floor area,	540			
34 Wood frame	· · · · · · · · · · · · · · · · · · ·	(septic tank, etc.)	all floors based on	exterior dimensions	~2/3/			
35 X Structural steel	H. TYPE OF WATER		56 Building length 57 Building width		181			
36 Reinforced concrete	1	or private company	58 Total sq. R. of bldg	. log(print	540'			
37 Other - Specify	46 Privale	<del></del>	59 Front lot line width 60 Rear lot line width		77.17			
F. PRINCIPAL TYPE OF HEATING FUEL	I. TYPE OF MECHI		61 Depth of lot		10.048			
36 Gas		uprinkler system? 48 🔯 NO	62 Total sq. fl. of fot a 63 % of fot occupied	ize hr hido, (68+621				
10 D 01	47 VES	48 (2) NO entral air conditioning?	64 Distance from lot I	ine (hord)	88			
40 Electricity	Will there be c	50 No	65 Distance from tot !	ine (resr)	-19,			
41 Coal	Will there be a	on elevator?	66 Distance from fol 67 Distance from fot i	ine (1611) ine (rioti)	56'			
42 Other - Specify	51 Tes	52 X No	0) Nismark unto ex-					



**Location: 3532 ACUSHNET AVE** 

Parcel ID: 134 297

Zoning: RA

Fiscal Year: 2015

**Current Sales Information:** 

Sale Date:

**Current Owner Information:** 

**CROOKS CAMERON A** 

11/15/2012

Sale Price:

3532 ACUSHNET AVE

Card No. 1 of 1

Legal Reference:

10581-69 NEW BEDFORD, MA 02745

**Grantor:** 

CROOKS, CAMERON A

This Parcel contains 0.231 acres of land mainly classified for assessment purposes as Single Fam with a(n) RANCH style building, built about 1951, having Wood Shingle exterior, Asphalt Shingles roof cover and 1280 Square Feet, with 1 unit(s), 5 total room(s), 2 total bedroom(s) 1 total bath(s), 0 3/4 baths, and 0 total half bath(s).

**Building Value:** 

Land Value:

Yard Items Value:

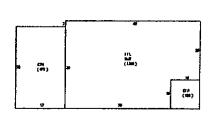
**Total Value:** 

86900

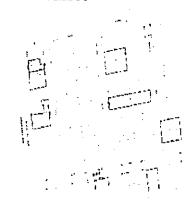
95500

400

182800







<b>Fisca</b>	1	<b>Vear</b>	2015

Tax:

## Fiscal Year 2014

Fiscal Year 2013

Tax Rate Res.:	15.73	Tax Rate Res.:	15.16	Tax Rate Res.:	14.33
Tax Rate Com.:	33.56	Tax Rate Com.:	31.08	Tax Rate Com.:	29.54
Property Code:	101	Property Code:	101	Property Code:	101
Total Bldg Value:	86900	Total Bldg Value:	87600	Total Bldg Value:	80900
Total Yard Value:	400	Total Yard Value:	400	Total Yard Value:	400
Total Land Value:	95500	Total Land Value:	97700	Total Land Value:	112800
Total Value:	182800	Total Value:	185700	Total Value:	194100

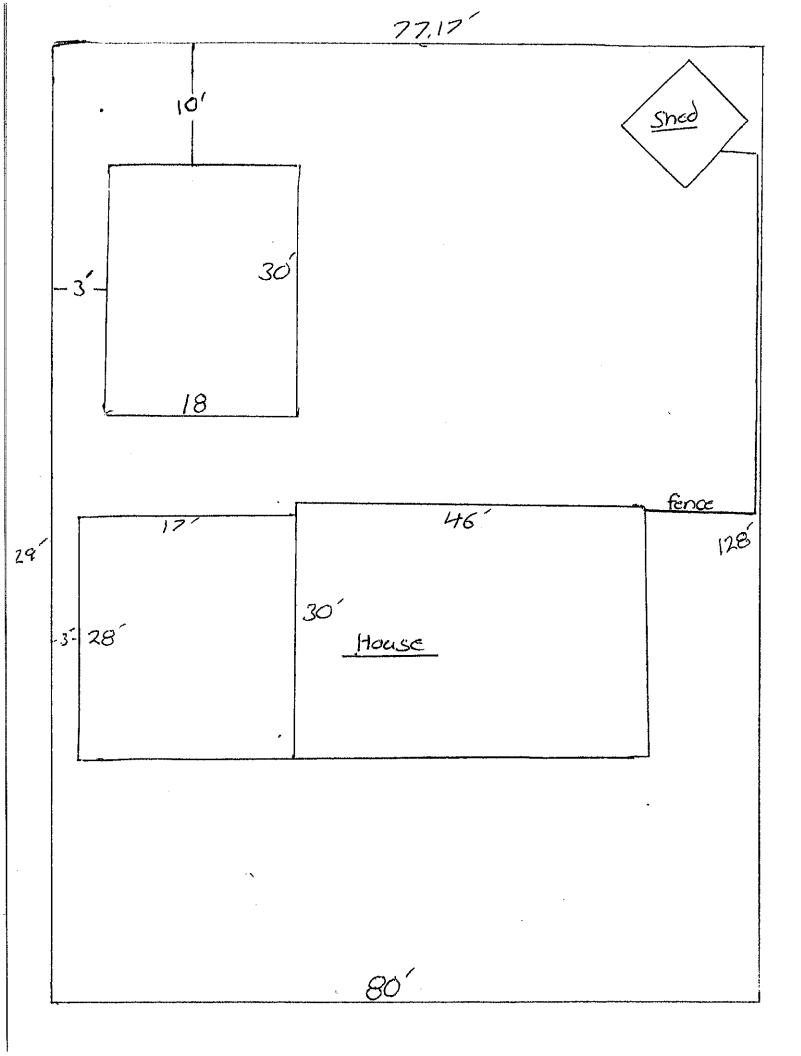
\$2,815.21

Tax:

Tax:

\$2,875.45

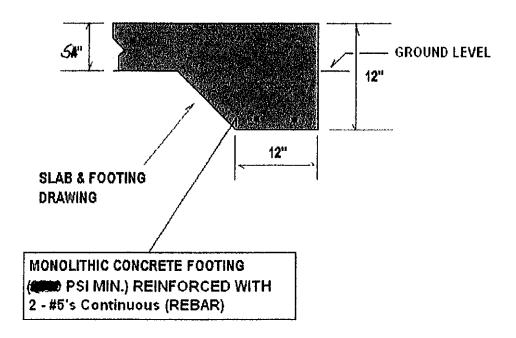
\$2,781.45





Back

## **FOOTING ILLUSTRATION**



Legal: This is an artist illustration of the required footer for garages in your area. This illustration should not be the basis for your construction. Any construction should be based on the engineering prints which are produced after you place an order for an engineer certified garage. The sole and only purpose of this attachment is to give you an idea of what is required for the footing.

