



DEPARTMENT OF INSPECTIONAL SERVICES  
133 WILLIAM STREET - ROOM 308  
NEW BEDFORD, MA 02740

CITY OF NEW BEDFORD  
JONATHAN F. MITCHELL, MAYOR

## ***New Bedford Comprehensive Zoning Code Review*** ***Code of Ordinances – Chapter-9***

935 Stratford St. – PLOT: 130– LOT: 451– ZONED DISTRICT: RA

**Attached garage addition 24x34**

### **Variance Required from the Zoning Board of Appeals**

#### ***Zoning Code Review as follows:***

Attached garage addition requires a 10' and 12' sideyard setback

#### ***Variance***

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##### **❖ SECTION**

- 2700 – DIMENSIONAL REGULATIONS
- 2710 – GENERAL
- 2720 – TABLE OF DIMENSIONAL REQS., APPENDIX B., SIDE YARD
- 2750 – YARDS IN RESIDENSE DISTRICTS
- 2755 – SIDE YARDS

**IX. HOMEOWNER LICENSE EXEMPTION**

**Supplement #1**

The current exemption for "homeowner" was extended to include owner-occupied dwellings of two units or less and to allow such homeowners to engage an individual for hire who does not possess a license, provided that the owner acts as supervisor. (State Building Code 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, attached or detached structures accessory to such use and /or farm structures. A 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 responsible for all 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, ordinance, rules and regulations, and will comply with the City of New Bedford Building Department minimum inspection procedures and requirements.

HOMEOWNERS SIGNATURE Domingos P. Alves

**X. CONSTRUCTION DEBRIS DISPOSAL**

**Supplement #2**

In accordance with provisions of Massachusetts General Law C4D, S54, debris resulting from this work shall be disposed of in a properly licensed solid waste disposal facility as defined by Massachusetts General Law C111, S150A

The debris will be disposed of in: ABC Disposal (Location of Facility)

Signature of Permit Applicant Esperanca Alves Date 3/30/15

**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, removal, demolition, or construction of an addition to any pre-existing owner-occupied building containing at least one but not more than four dwelling units... or to structures which are adjacent to such residence of building" be conducted by registered contractors, with certain exceptions, along with other requirements.

Type of Work: Attached garage Addition Est. Cost 25,000.00

Address of Work: 935 Stratford St N.B. Ma.

Owner Name: Domingos Alves 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     Owner obtaining own permit

Other (specify) \_\_\_\_\_  
 Notice is hereby given that: **OWNERS OBTAINING THEIR OWN PERMIT OR EMPLOYING UNREGISTERED CONTRACTORS FOR APPLICABLE HOME IMPROVEMENT WORK DO NOT HAVE ACCESS TO THE ARBITRATION PROGRAM OF GUARANTY FUND UNDER MGLC. 142A.**

signed under penalties of perjury:  
 I hereby apply for a permit as the agent of the owner:

Date \_\_\_\_\_ Contractor Signature \_\_\_\_\_ Registration No. \_\_\_\_\_  
 OR:  
 Notwithstanding the above notice, I hereby apply for a permit as the owner of the above property:  
 Date 3/30/15 Owner Signature Esperanca Alves

**XII. BUILDING COMMISSIONERS REVIEW COMMENTS AND CONDITIONS**

C. Building Permit Rejected  VARIANCE ZBA Fee \_\_\_\_\_  
 Reason For Rejection: \_\_\_\_\_ Permit # \_\_\_\_\_  
SEE Attachments

Comments and Conditions: \_\_\_\_\_  
 Signed Danny M. Romanowicz Date: \_\_\_\_\_ 20\_\_\_\_  
 Title Building Commissioner  
 (not valid unless signed (not stamped) by Building Commissioner)



*City of New Bedford, Massachusetts*  
**Building Department**  
**Application for Plan Examination**  
**and Building Permit**

**FOR BUILDING DEPT. USE**  
 DATE RECEIVED MAR 30 2018  
 RECEIVED BY \_\_\_\_\_  
 ISSUED BY: \_\_\_\_\_

**IMPORTANT — COMPLETE ALL ITEMS — MARK BOXES WHERE APPLICABLE — PRINT**

Permit No. \_\_\_\_\_  
 Completion Date \_\_\_\_\_

(AT LOCATION) 935 STRATFORD STREET  
(NO) (STREET)

BETWEEN MORRIS STREET AND BARTLET STREET  
(CROSS STREET) (CROSS STREET)

PLOT 130 LOT 451 DISTRICT \_\_\_\_\_ ACCEPTED STREET \_\_\_\_\_

PLANS FILED  YES  NO

**II. TYPE AND COST OF BUILDING — all applicants complete parts A through D — PRINT**

<p><b>A. TYPE OF IMPROVEMENT</b></p> <p>1 <input type="checkbox"/> New Building</p> <p>2 <input checked="" type="checkbox"/> Addition (if residential, enter number of new housing units added, if any, in Part D, 14)</p> <p>3 <input type="checkbox"/> Alteration (if residential, enter number of new housing units added, if any, in Part D, 14)</p> <p>4 <input type="checkbox"/> Repair, replacement</p> <p>5 <input type="checkbox"/> Demolition (if multifamily residential, enter number of units in building in Part D, 14, if non-residential, indicate most recent use checking D-18 - D-32)</p> <p>6 <input type="checkbox"/> Moving (relocation)</p> <p>7 <input type="checkbox"/> Foundation only</p>	<p><b>D.1 PROPOSED USE — For demolition most recent use</b></p> <table border="0"> <tr> <td><i>Residential</i></td> <td><i>Nonresidential</i></td> </tr> <tr> <td>13 <input type="checkbox"/> One family</td> <td>19 <input type="checkbox"/> Amusement, recreational</td> </tr> <tr> <td>14 <input type="checkbox"/> Two or more family — Enter number of units _____</td> <td>20 <input type="checkbox"/> Church, other religious</td> </tr> <tr> <td>15 <input type="checkbox"/> Transient hotel, motel, or dormitory — Enter number of units _____</td> <td>21 <input type="checkbox"/> Industrial</td> </tr> <tr> <td>16 <input checked="" type="checkbox"/> Garage</td> <td>22 <input type="checkbox"/> Parking garage</td> </tr> <tr> <td>17 <input type="checkbox"/> Carport</td> <td>23 <input type="checkbox"/> Service station, repair garage</td> </tr> <tr> <td>18 <input type="checkbox"/> Other — Specify _____</td> <td>24 <input type="checkbox"/> Hospital, institutional</td> </tr> <tr> <td></td> <td>25 <input type="checkbox"/> Office, bank, professional</td> </tr> <tr> <td></td> <td>26 <input type="checkbox"/> Public utility</td> </tr> <tr> <td></td> <td>27 <input type="checkbox"/> School, library, other educational</td> </tr> <tr> <td></td> <td>28 <input type="checkbox"/> Stores, mercantile</td> </tr> <tr> <td></td> <td>29 <input type="checkbox"/> Tanks, towers</td> </tr> <tr> <td></td> <td>30 <input type="checkbox"/> Funeral homes</td> </tr> <tr> <td></td> <td>31 <input type="checkbox"/> Food establishments</td> </tr> <tr> <td></td> <td>32 <input type="checkbox"/> Other — Specify _____</td> </tr> </table>	<i>Residential</i>	<i>Nonresidential</i>	13 <input type="checkbox"/> One family	19 <input type="checkbox"/> Amusement, recreational	14 <input type="checkbox"/> Two or more family — Enter number of units _____	20 <input type="checkbox"/> Church, other religious	15 <input type="checkbox"/> Transient hotel, motel, or dormitory — Enter number of units _____	21 <input type="checkbox"/> Industrial	16 <input checked="" type="checkbox"/> Garage	22 <input type="checkbox"/> Parking garage	17 <input type="checkbox"/> Carport	23 <input type="checkbox"/> Service station, repair garage	18 <input type="checkbox"/> Other — Specify _____	24 <input type="checkbox"/> Hospital, institutional		25 <input type="checkbox"/> Office, bank, professional		26 <input type="checkbox"/> Public utility		27 <input type="checkbox"/> School, library, other educational		28 <input type="checkbox"/> Stores, mercantile		29 <input type="checkbox"/> Tanks, towers		30 <input type="checkbox"/> Funeral homes		31 <input type="checkbox"/> Food establishments		32 <input type="checkbox"/> Other — Specify _____
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<p><b>B. OWNERSHIP</b></p> <p>8 <input checked="" type="checkbox"/> Private (individual, corporation, nonprofit institution, etc.)</p> <p>9 <input type="checkbox"/> Public (Federal, State, or local government)</p>	<p><b>D.2 Does this building contain asbestos?</b></p> <p><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO If yes complete the following.</p> <p>Name &amp; Address of Asbestos Removal Firm: _____</p>																														
<p><b>C. COST</b> <span style="float: right;"><i>(Omit cents)</i></span></p> <p>10 Cost of construction to be installed but not included in the above cost \$ <u>25,000</u></p> <p>a. Electrical _____</p> <p>b. Plumbing _____</p> <p>c. Heating, air conditioning _____</p> <p>d. Other (elevator, etc.) _____</p> <p>11 TOTAL VALUE OF CONSTRUCTION <u>25,000</u></p> <p>12 TOTAL ASSESSED BLDG. VALUE _____</p>	<p><b>D.3 Non-residential — Describe in detail proposed use of buildings, e.g., food processing plant, machine shop, laundry building at hospital, elementary school, secondary school, college, parochial school, parking garage for department store, rental office building, office building at industrial plant. If use of existing building is being changed, enter proposed use.</b></p> <p>_____</p> <p>_____</p>																														

**III. SELECTED CHARACTERISTICS OF BUILDING — For new buildings complete part E through I. For demolition, complete only parts G; H & I. For all others, (additions, alterations, repair, moving, foundation), complete E through I.**

<p><b>E. PRINCIPAL TYPE OF FRAME</b></p> <p>33 <input type="checkbox"/> Masonry (wall bearing)</p> <p>34 <input checked="" type="checkbox"/> Wood frame</p> <p>35 <input type="checkbox"/> Structural steel</p> <p>36 <input type="checkbox"/> Reinforced concrete</p> <p>37 <input type="checkbox"/> Other — Specify _____</p>	<p><b>G. TYPE OF SEWAGE DISPOSAL</b></p> <p>43 <input checked="" type="checkbox"/> Public or private company</p> <p>44 <input type="checkbox"/> Private (septic tank, etc.)</p> <p><b>H. TYPE OF WATER SUPPLY</b></p> <p>45 <input checked="" type="checkbox"/> Public or private company</p> <p>46 <input type="checkbox"/> Private (well, cistern)</p>	<p><b>J. DIMENSIONS</b></p> <p>53 Number of stories <u>1 1/2</u></p> <p>54 Height <u>18 FT</u></p> <p>55 Total square feet of floor area, all floors based on exterior dimensions <u>996 SQ FT</u></p> <p>56 Building length <u>24 FT</u></p> <p>57 Building width <u>34 FT</u></p> <p>58 Total sq. ft. of bldg. footprint <u>816 SQ FT</u></p> <p>59 Front lot line width <u>72.5 FT</u></p> <p>60 Rear lot line width <u>70.5 FT</u></p> <p>61 Depth of lot <u>100 FT</u></p> <p>62 Total sq. ft. of lot size <u>7,250 SQ FT</u></p> <p>63 % of lot occupied by bldg. (55+62) <u>12% 30% SQ FT</u></p> <p>64 Distance from lot line (front) <u>27 FT</u></p> <p>65 Distance from lot line (rear) <u>19 FT</u></p> <p>66 Distance from lot line (left) <u>41 FT</u></p> <p>67 Distance from lot line (right) <u>41.5 FT</u></p>
<p><b>F. PRINCIPAL TYPE OF HEATING FUEL</b></p> <p>38 <input checked="" type="checkbox"/> Gas</p> <p>39 <input type="checkbox"/> Oil</p> <p>40 <input type="checkbox"/> Electricity</p> <p>41 <input type="checkbox"/> Coal</p> <p>42 <input type="checkbox"/> Other — Specify _____</p>	<p><b>I. TYPE OF MECHANICAL</b></p> <p>Is there a fire sprinkler system?</p> <p>47 <input type="checkbox"/> YES 48 <input checked="" type="checkbox"/> NO</p> <p>Will there be central air conditioning?</p> <p>49 <input type="checkbox"/> Yes 50 <input type="checkbox"/> No</p> <p>Will there be an elevator?</p> <p>51 <input type="checkbox"/> Yes 52 <input checked="" type="checkbox"/> No</p>	

OTHER APPLICABLE REVIEWS

K. FLOODPLAIN

Is location within flood hazard area? yes (no)

If yes, zone : \_\_\_\_\_ and base elevation \_\_\_\_\_

L. WETLANDS PROTECTION

Is location subject to flooding? No

Is location part of a known wetland? No

Has local conservation commission reviewed this site? No

IV. IDENTIFICATION - ALL APPLICANTS - PLEASE PRINT

OWNER OR LESSEE NAME	MAILING ADDRESS	ZIP CODE	TELEPHONE NO.
Dominigos Alves	935 STRATFORD STREET, NEW BEDFORD, MA	02745	(508) 717-7593
CONTRACTOR NAME	MAILING ADDRESS	ZIP CODE	TELEPHONE NO.
ARCHITECT NAME	MAILING ADDRESS	ZIP CODE	TELEPHONE NO.
SIGNATURE OF OWNER	APPLICANT SIGNATURE	DATE	
<i>Dominigos P. Alves</i>		5/22/15	

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 requirements. 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.

*Dominigos P. Alves* 935 Stratford St NB MA 02745  
 Applicant's Signature Address City

V. OTHER JURISDICTION APPROVALS AND NOTIFICATION

APPROVAL	CHECK	DATE OBTAINED	BY
Electrical			
Plumbing			
Fire Department			
Water			
Planning			
Conservation			
Public Works			
Health			
Licensing			
Other			

VI. ZONING REVIEW

DISTRICT: R. A. USE: \_\_\_\_\_

FRONTAGE: 72.5' LOT SIZE: 72.5' W x 100' D 7,250 SQ. FT.

SETBACKS:

FRONT: 27' LEFT SIDE: 14' RIGHT SIDE: 24'-6" REAR: 49'

PERCENTAGE OF LOT COVERAGE PRIMARY BUILDING 16.9%

VARIANCE HISTORY None

VII. WORKER'S COMPENSATION INSURANCE AFFIDAVIT

I, \_\_\_\_\_  
 (licensee/permittee) with a principal place of business/residence at:

(City/State/Zip) do hereby certify, under the pains and penalties of perjury, that:

I am an employer providing worker's compensation coverage for my employees working on this job.

Insurance Company \_\_\_\_\_ Policy Number \_\_\_\_\_

I am a sole proprietor and have no one working for me.

I am a sole proprietor, general contractor, or homeowner and have hired the contractors listed below who have the following worker's compensation insurance policies:

Name of contractor \_\_\_\_\_ Insurance Company/policy number \_\_\_\_\_

Name of contractor \_\_\_\_\_ Insurance Company/policy number \_\_\_\_\_

I am a homeowner performing all the work myself.

NOTE: Please be aware that while homeowners who employ persons to do maintenance, construction or repair work on a dwelling of not more than three units in which the homeowner also resides or on the grounds appurtenant thereto are not generally considered to be employers under the Workers' Compensation Act (GL C. 152, sect. 1(5)), application by a homeowner for a license or permit may evidence the legal status of an employer under the Workers' Compensation Act.

I understand that a copy of this statement will be forwarded to the Department of Industrial Accidents' Office of Insurance for coverage verification and that failure to secure coverage as required under Section 25A of MGL 152 can lead to the imposition of criminal penalties consisting of a fine of up to \$1500.00 and/or imprisonment of up to one year and civil penalties in the form of a Stop Work Order and a fine of \$100.00 a day against me.

Signed this Domingo P. A. Luis day of 3/30/15, 2015



LOCATION 935 Dennis Sansbury  
Waldenwood Dr. 275.44' N of Wood's Woods

FILE 130 Lot 451

DISTRICT: Res Z A LOT 451

PERMIT NO. USE PLOT 130 PLANS: 8/15/78  
CONST.

449-76 Erect One Family Dwelling

Spec. Invest. 4/4/78

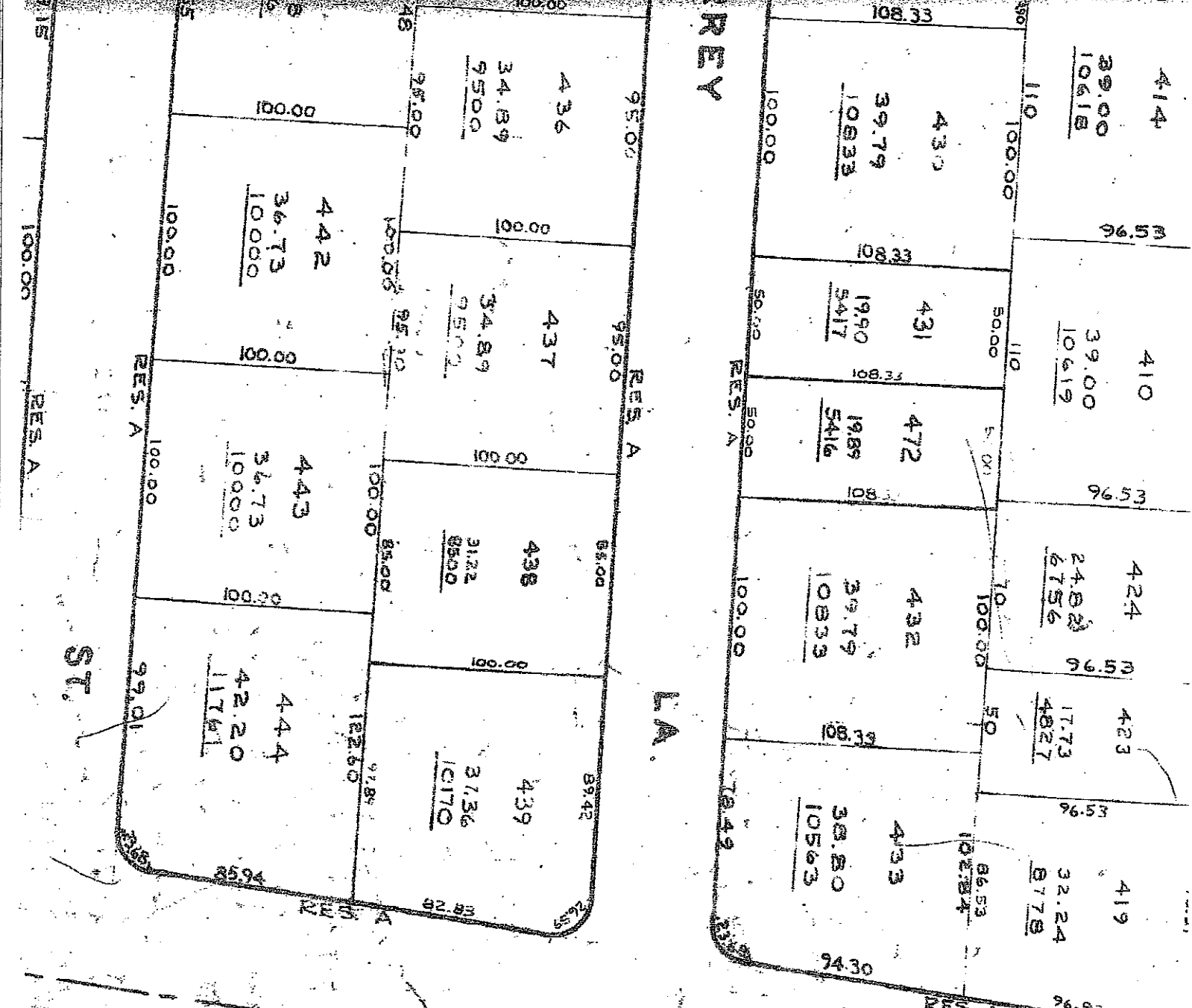
Spec. Invest. 8/ 22/78

Spec. Invest letter 9/15/78

1067-82 Install wood burning stove

702-90 Alterations to the 2nd floor (Plans)

263-00 Install Farmers Porch, w/2 New Skylights  
Install Vinyl Siding



414  
 39.00  
 10618

410  
 39.00  
 10619

424  
 24.82  
 6156

423  
 17.73  
 4827

419  
 32.24  
 8778

430  
 39.79  
 10833

431  
 19.90  
 5417

472  
 19.89  
 5416

432  
 39.79  
 10833

433  
 38.80  
 10563

436  
 34.89  
 9500

437  
 34.89  
 9500

438  
 31.22  
 8500

439  
 37.36  
 10170

442  
 36.73  
 10000

443  
 36.73  
 10000

444  
 42.20  
 11761

CUSHNET

KREY

L.A.

ST.

ST.

915

100.00

RES. A

100.00

RES. A

100.00

RES. A

100.00

RES. A



# STREET

RES. A

