

Zoning Review:

377 Cedar Street, Cedar Street Convenience Store

Plot: 108, Lot: 172, Zoning: MUB

Variance Required – No Parking or Loading Spaces

Reasons for Denial:

Zoning Sections: 3100. Parking and Loading.

3116. Applicability

3130. Table of Parking and Loading Requirements. Appendix C

Business engaged in retail sale; One (1) space per each 400 Sq. ft. of gross floor area, but not less than two (2) spaces for each business use intended to occupy the premises

One loading space for each building containing more than 5,000 and less than 10,000 sq. ft. of floor area. Thereafter, one (1) additional loading space shall be required for each additional 25,000 sq. ft. of gross floor area.

Multi-family (3) or more per structure; Two (2) spaces per dwelling unit

One (1) loading space for each multifamily dwelling containing more than ten (10) dwelling units, or more than (20) housekeeping units

3-Store not being Handicap Accessible as per the Architectural Access Board



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

FOR BUILDING DEPT. USE

DATE RECEIVED: _____
 RECEIVED BY: DEC 6 2014
 ISSUED BY: _____

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

Permit No. _____
 Completion Date _____

(AT LOCATION) 377 Cedar St
 (NO) (STREET)
 BETWEEN _____ AND _____
 (CROSS STREET) (CROSS STREET)
 PLOT _____ LOT _____ DISTRICT _____ ACCEPTED STREET _____
 PLANS FILED: YES NO

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

<p>A. TYPE OF IMPROVEMENT</p> <p>1 <input type="checkbox"/> New Building</p> <p>2 <input 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 checked="" 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>D.1 PROPOSED USE — For demolition most recent use</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 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 checked="" type="checkbox"/> Other — Specify <u>Commercial</u></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 checked="" 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 type="checkbox"/> Garage	22 <input type="checkbox"/> Parking garage	17 <input type="checkbox"/> Carport	23 <input type="checkbox"/> Service station, repair garage	18 <input checked="" type="checkbox"/> Other — Specify <u>Commercial</u>	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 checked="" 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. OWNERSHIP</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>D.2. Does this building contain asbestos?</p> <p><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO If yes complete the following:</p> <p>Name & Address of Asbestos Removal Firm: _____</p>																														
<p>C. COST (Omit cents)</p> <p>10. Cost of construction To be installed but not included in the above cost \$ <u>2000</u></p> <p>a. Electrical <u>1500</u></p> <p>b. Plumbing <u>1500</u></p> <p>c. Heating, air conditioning _____</p> <p>d. Other (elevator, etc.) _____</p> <p>11. TOTAL VALUE OF CONSTRUCTION <u>5000</u></p> <p>12. TOTAL ASSESSED BLDG. VALUE _____</p>	<p>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.</p> <p><u>Exterior signs</u> <u>build countertop and paint</u></p>																														

*Change of tenancy
 Change of use
 Change of owner*

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

<p>E. PRINCIPAL TYPE OF FRAME</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>G. TYPE OF SEWAGE DISPOSAL</p> <p>43 <input checked="" type="checkbox"/> Public or private company</p> <p>44 <input type="checkbox"/> Private (septic tank, etc.)</p>	<p>J. DIMENSIONS</p> <p>53 Number of stories _____</p> <p>54 Height _____</p> <p>55 Total square feet of floor area, all floors based on exterior dimensions _____</p> <p>56 Building length _____</p> <p>57 Building width _____</p> <p>58 Total sq. ft. of bldg. footprint _____</p> <p>59 Front lot line width _____</p> <p>60 Rear lot line width _____</p> <p>61 Depth of lot _____</p> <p>62 Total sq. ft. of lot size _____</p> <p>63 % of lot occupied by bldg. (58-62) _____</p> <p>64 Distance from lot line (front) _____</p> <p>65 Distance from lot line (rear) _____</p> <p>66 Distance from lot line (left) _____</p> <p>67 Distance from lot line (right) _____</p>
<p>F. PRINCIPAL TYPE OF HEATING FUEL</p> <p>38 <input 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>H. TYPE OF WATER-SUPPLY</p> <p>45 <input checked="" type="checkbox"/> Public or private company</p> <p>46 <input type="checkbox"/> Private (well, cistern)</p> <p>I. TYPE OF MECHANICAL</p> <p>Is there a fire sprinkler system?</p> <p>47 <input type="checkbox"/> YES 48 <input 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 type="checkbox"/> No</p>	

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: _____ USE: _____

FRONTAGE: _____ LOT SIZE: _____

SETBACKS:

FRONT: _____ LEFT SIDE: _____ RIGHT SIDE: _____ REAR: _____

PERCENTAGE OF LOT COVERAGE PRIMARY BUILDING _____

VARIANCE HISTORY _____

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 * M. Alara day of 11-01-2019, 2019

add change
 HO 51 75 ea 36 30

Permit No. B-14-2163
 Completion Date



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

FOR BUILDING DEPT. USE
 DATE RECEIVED: _____
 RECEIVED BY: **NOV 04 2014**
 ISSUED BY: **OX**

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

(AT LOCATION) 377 CEDAR ST.
(NO) (STREET)
 BETWEEN _____ AND _____
(CROSS STREET) (CROSS STREET)
 PLOT 77 LOT 122 DISTRICT _____ ACCEPTED STREET _____
(CROSS STREET)
 PLANS FILED YES NO

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

A. TYPE OF IMPROVEMENT

1 New Building
 2 Addition (If residential, enter number of new housing units added, if any, in Part D, 14)
 3 Alteration (If residential, enter number of new housing units added, if any, in Part D, 14)
 4 Repair, replacement
 5 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)
 6 Moving (relocation)
 7 Foundation only

D1. PROPOSED USE — For demolition most recent use

Change of use

Residential <input type="checkbox"/> 13 One family <input type="checkbox"/> 14 Two or more family — Enter number of units _____ <input type="checkbox"/> 15 Transient hotel, motel, or dormitory — Enter number of units _____ <input type="checkbox"/> 16 Garage <input type="checkbox"/> 17 Carport <input type="checkbox"/> 18 Other — Specify _____	Nonresidential <input type="checkbox"/> 19 Amusement, recreational <input type="checkbox"/> 20 Church, other religious <input type="checkbox"/> 21 Industrial <input type="checkbox"/> 22 Parking garage <input type="checkbox"/> 23 Service station, repair garage <input type="checkbox"/> 24 Hospital, institutional <input type="checkbox"/> 25 Office, bank, professional <input type="checkbox"/> 26 Public utility <input type="checkbox"/> 27 School, library, other educational <input checked="" type="checkbox"/> 28 Stores, mercantile <input type="checkbox"/> 29 Tanks, towers <input type="checkbox"/> 30 Funeral homes <input type="checkbox"/> 31 Food establishments <input type="checkbox"/> 32 Other — Specify _____
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D2. Does this building contain asbestos?
 YES NO If yes complete the following:
 Name & Address of Asbestos Removal Firm: _____
 Submit copy of notification sent to DEQE and the State Dept. of Labor & Industries and results of air sample analysis after asbestos removal is completed.

B. OWNERSHIP

8 Private (individual, corporation, nonprofit institution, etc.)
 9 Public (Federal, State, or local government)

C. COST (Omit cents)

10. Cost of construction \$ 0
To be installed but not included in the above cost
 a. Electrical
 b. Plumbing
 c. Heating, air conditioning
 d. Other (elevator, etc.)
 11. TOTAL VALUE OF CONSTRUCTION
 12. TOTAL ASSESSED BLDG. VALUE

D3. 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.

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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: _____ USE: _____

FRONTAGE: _____ LOT SIZE: _____

SETBACKS:

FRONT: _____ LEFT SIDE: _____ RIGHT SIDE: _____ REAR: _____

PERCENTAGE OF LOT COVERAGE PRIMARY BUILDING _____

VARIANCE HISTORY _____

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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.

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Signed this AA Alcorn day of November 2, 2014

120

MS

1000

1100

63

48

120

120

MS

1000

1100

1200

1300

1400

1500

Location: 377 379 CEDAR ST

Parcel ID: 77 122

Zoning: MUB

Fiscal Year: 2014

Current Owner Information:
P6 MANAGEMENT GROUP LLC

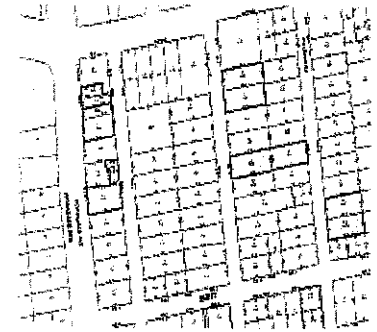
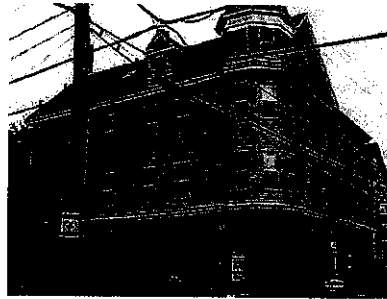
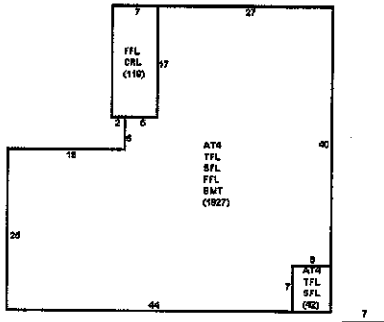
14 PARKER STREET
NEW BEDFORD, MA 02740

Current Sales Information:
Sale Date: 01/14/2005
Sale Price: \$400,000.00
Legal Reference: 7369-319
Grantor: WILLETTE, PHILIP J

Card No. 1 of 1

This Parcel contains 0.093 acres of land mainly classified for assessment purposes as Mix Res-Com with a(n) MIXED USE style building, built about 1878, having Vinyl exterior, Asphalt Shingles roof cover and 6581 Square Feet, with 7 unit(s), 31 total room(s), 18 total bedroom(s) 6 total bath(s), 0 3/4 baths, and 1 total half bath(s).

Building Value:	Land Value:	Yard Items Value:	Total Value:
236800	58600	0	295400



Fiscal Year 2014		Fiscal Year 2013		Fiscal Year 2012	
Tax Rate Res.:	15.16	Tax Rate Res.:	14.33	Tax Rate Res.:	13.76
Tax Rate Com.:	31.08	Tax Rate Com.:	29.54	Tax Rate Com.:	28.44
Property Code:	013	Property Code:	013	Property Code:	013
Total Bldg Value:	236800	Total Bldg Value:	254600	Total Bldg Value:	269900
Total Yard Value:	0	Total Yard Value:	0	Total Yard Value:	0
Total Land Value:	58600	Total Land Value:	71300	Total Land Value:	73300
Total Value:	295400	Total Value:	325900	Total Value:	343200
Tax:	\$5,418.82	Tax:	\$5,661.53	Tax:	\$5,730.07

Disclaimer: Classification is not an indication of uses allowed under city zoning. This information is believed to be correct but is subject to change and is not warranted.

	30; 40 on corner lots	30; 40 on corner lots	30; 40 on corner lots	30; 40 on corner lots	Buildings; 20 feet for 3 or more stories 30; 40 on corner lots for uses allowed in residential district; 0 for other uses	50	50	50	50	50	more stories
Green Space	35%	35%	35%	35%	35% for uses allowed in residential districts; 0 for other uses	20%	20%	20%	20%	20%	

¹ Provided, however, that no part of any building shall be erected to a height in excess of 1-3/4 times the horizontal distance from its face to the opposite street line.

² Provided, however, that no story or part of any building except projecting eaves or uncovered steps shall be erected nearer to the street line of any street on which it fronts than the average alignment of the corresponding stories or parts of existing buildings within two hundred (200) feet on each side of the lot and within the same block and district. Where there is a building on one or both of the adjoining lots, the front yard for a building shall have a depth equal to the average of the front yard depths of the two (2) adjoining lots. A lot without a building shall be counted as having a front yard of the depth required by this chapter. If there are no existing buildings on the same side of the street, the average setback alignment of corresponding stories within two hundred (200) feet on each side of and directly opposite the lot shall govern. One street frontage of a center lot shall have a clear depth of no less than ten (10) feet, in which case this distance shall not be considered in determining the front yard depths on such street. Nothing in this chapter shall require any building hereafter erected between two (2) existing buildings or immediately adjacent lots to set back from the street a greater distance than that one of such two (2) existing buildings which is farther from the street line.

(Ord. of 12-23-03, § 1)

New Bedford, Massachusetts, Code of Ordinances >> - CODE OF ORDINANCES >> Chapter 9 - COMPREHENSIVE ZONING >> APPENDIX C - TABLE OF PARKING AND LOADING REQUIREMENTS >>

**APPENDIX C
- TABLE OF PARKING AND LOADING REQUIREMENTS**

USE	PARKING REQUIREMENTS	LOADING REQUIREMENTS
one-family dwelling two-family dwelling multi-family (3) or more per structure	Two (2) spaces per dwelling unit Two (2) spaces per dwelling unit	One (1) loading space for each multifamily dwelling containing more than ten (10) dwelling units, or more than twenty (20) housekeeping units
Hotel, motel, bed and breakfast, rooming boarding or lodging house, tourist home, dormitories, or other non-family residence accommodations, excluding group homes	One (1) space per each employee per shift, who does not reside on the premises; one (1) space per guest room, dwelling parking requirements, if applicable	One (1) loading space for each building containing more than 20 guest rooms
Offices: General, professional, business, medical clinics and laboratories, radio and television stations; office of non-profit educational, cultural, or charitable organizations	One (1) space per each 200 sq. ft. of gross floor area but not less than two (2) spaces for each business unit intended to occupy the premises. After 10,000 sq. ft. of gross floor area, one space for every 1,000 sq. ft. of gross floor area	One (1) loading space for each building containing 10,000 sq. ft. or more of gross floor area. Two (2) loading spaces for 100,000 sq. ft. or more of gross floor area

Danny Romanowicz

From: Mary Freire Kellogg
Sent: Wednesday, December 03, 2014 2:45 PM
To: Danny Romanowicz
Subject: RE: 377 Cedar Street

Danny,
WE closed the file on 5-10-12.

From: Danny Romanowicz
Sent: Wednesday, December 03, 2014 1:56 PM
To: Stephanie Macomber
Cc: Sandy Manning; Mary Freire Kellogg; Joseph Kaufman
Subject: RE: 377 Cedar Street

Ok Thank you Stephanie....

Sandy/Mary

Can you tell me the last time you had a permit for JC Variety ?

Thank you all and,
May you all have a relaxing evening...
Danny

From: Stephanie Macomber
Sent: Wednesday, December 03, 2014 1:53 PM
To: Danny Romanowicz; Dennis Farias
Cc: Joseph Kaufman
Subject: RE: 377 Cedar Street

Hi Danny,

The filed a business certificate Nov. 13, of this year under the name of Cedars Convenience Plus by Manzur Alam. Before that it was J C Variety which expired in 2008. Let me know if you need a copy of the current business certificate.

*Stephanie M. Macomber
Asst. City Clerk
133 William St.
New Bedford, MA 02740
Phone: 508-979-1453
Fax: 508-991-6225*

From: Danny Romanowicz
Sent: Wednesday, December 03, 2014 1:46 PM
To: Dennis Farias
Cc: Stephanie Macomber; Joseph Kaufman
Subject: 377 Cedar Street.

Dennis / Stephanie,

Can you please tell u\s when this building had its last business certificate?

It was a convenience store before it closed the doors ,need to know if it was closed for more than 2 years

Thank you

Danny

Danny D. Romanowicz

Danny D. Romanowicz C.B.O.
Commissioner of Buildings
and Inspectional Services

133 William Street
New Bedford, Ma. 02740
Telephone 508 979 1540
Fax 508 961 3143
danny.romanowicz@newbedford-ma.gov.

Location: 377 379 CEDAR ST

Parcel ID: 77 122

Zoning: MUB

Fiscal Year: 2014

Current Owner Information:
P6 MANAGEMENT GROUP LLC

14 PARKER STREET
NEW BEDFORD, MA 02740

Current Sales Information:

Sale Date:

01/14/2005

Sale Price:

\$400,000.00

Legal Reference:

7369-319

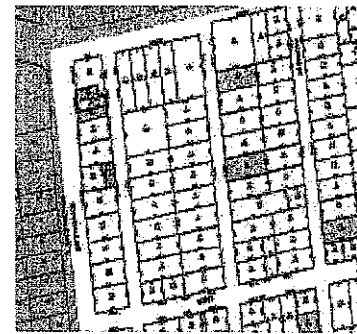
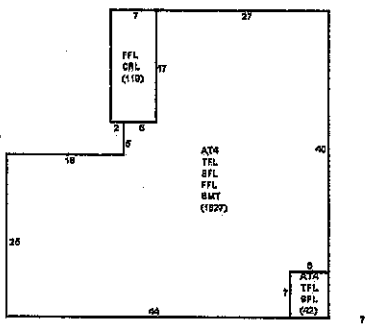
Grantor:

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Building Value:	Land Value:	Yard Items Value:	Total Value:
236800	58600	0	295400



	Fiscal Year 2014	Fiscal Year 2013	Fiscal Year 2012
Tax Rate Res.:	15.16	Tax Rate Res.:	14.33
Tax Rate Com.:	31.08	Tax Rate Com.:	29.54
Property Code:	013	Property Code:	013
Total Bldg Value:	236800	Total Bldg Value:	254600
Total Yard Value:	0	Total Yard Value:	0
Total Land Value:	58600	Total Land Value:	71300
Total Value:	295400	Total Value:	325900
Tax:	\$5,418.82	Tax:	\$5,661.53
			\$5,730.07

Disclaimer: Classification is not an indication of uses allowed under city zoning.
This information is believed to be correct but is subject to change and is not warranted.

→ Started construction
no permit
re: Virgil Miranda
CSL 10339

CEDAR ST 377-381

DISTRICT "BUS" Lot 122

PERMIT NO. 602-96 USE TWO STORES FOR TENEMENTS PLANS FILED

35-70

210-86 Interior remodeling for 2 bedroom apt (Plans)

1519-86 Remodel kitchen and bathroom in apt.

103-87 Alterations to 1 br 1 1/2 bath

C.I. issued for 6 units
4/22/86

5741-bw

377-381 Cedar St.

DISTRICT	PLOT	LOT
PERMIT NO.	PURPOSE	PLANS FILED
	Special Investigation	3/31/98
	Certified Letter	5/12/98

31-758 F94

When did
last business close?
2 yrs?

Commit store less the 9 year nonconform
no parking on - Cpc existing nonconform

OF OWNER Premises are a part shall be liable hereunder except for breaches of the LESSOR's obligations occurring during the period of such ownership. The obligations of the LESSOR shall be binding upon the LESSOR's interest in said property, but not upon other assets of the LESSOR, and no individual partner, agent, trustee, stockholder, officer, director, employee or beneficiary of the LESSOR shall be personally liable for performance of the LESSOR's obligations hereunder.

25. ADDITIONAL PROVISIONS This lease shall be governed by and construed in accordance with the laws of the Commonwealth of Massachusetts. This lease constitutes the entire, complete and exclusive understanding and agreement between the LESSOR and LESSEE and supersedes all other communications, whether oral or written, between the parties. Neither party has been induced to enter into this agreement by any statement or representation no expressly contained or set forth in this lease. This lease may not be changed or modified except by a subsequent instrument in writing duly signed by LESSOR or LESSEE.

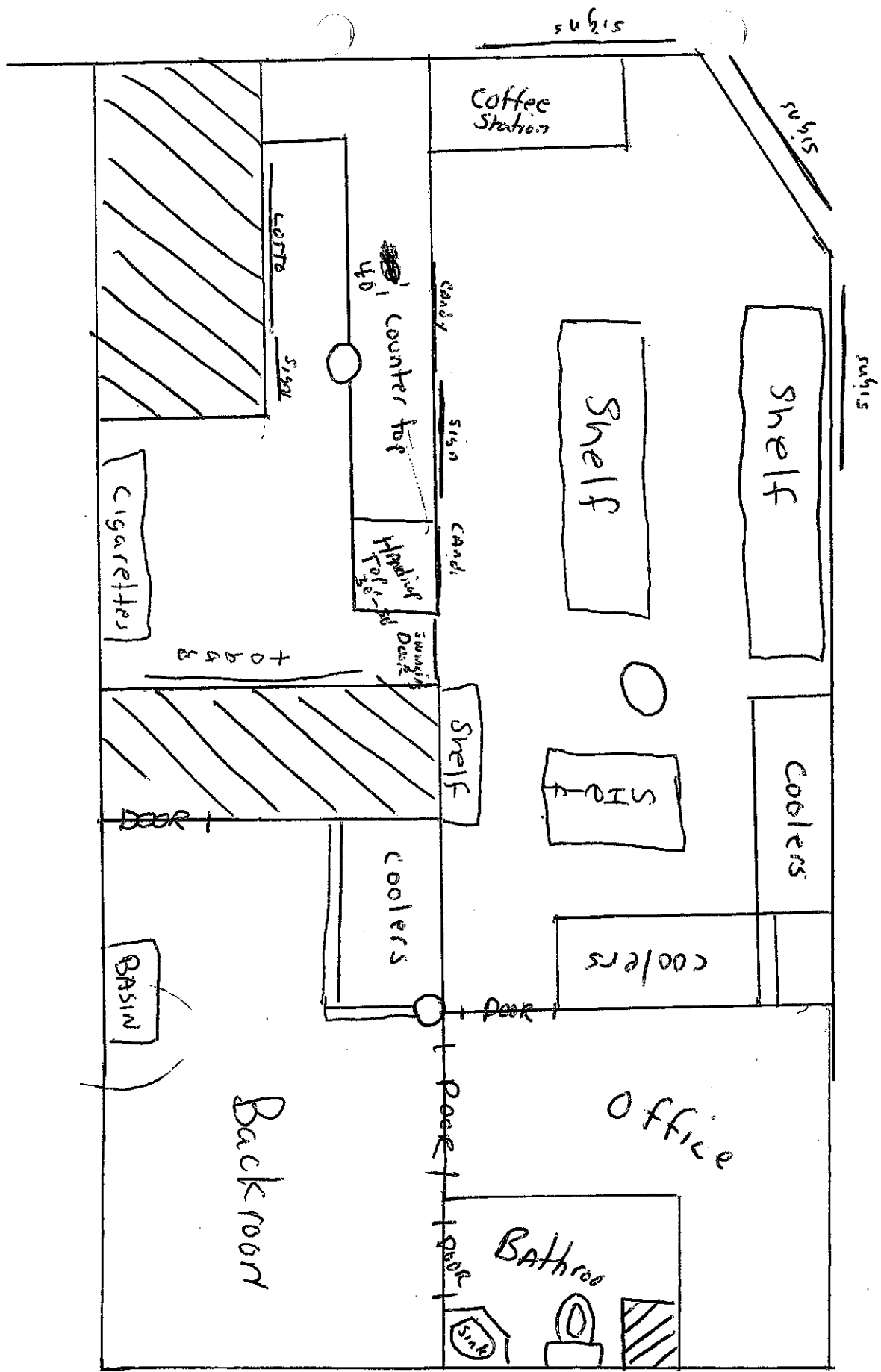
IN WITNESS WHEREOF, the LESSOR and LESSEE have hereunder set their hands and common seal this _____ day of October, 2014.

LESSOR,

LESSEE,

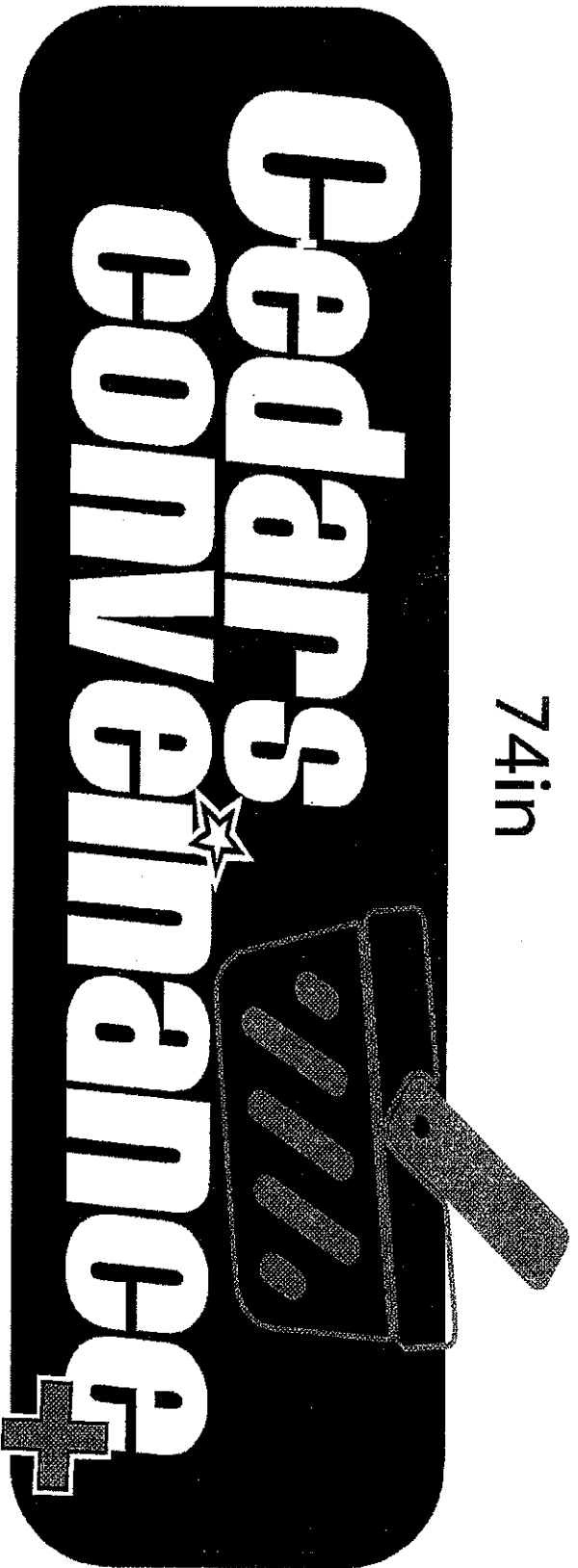
Joseph A. Duarte *M. Alam*
Joseph A. Duarte, Manager *10/10/14* Manzur Alam *10-10-14*

Drum Duarte *10-10-14*
Building Manager



2x

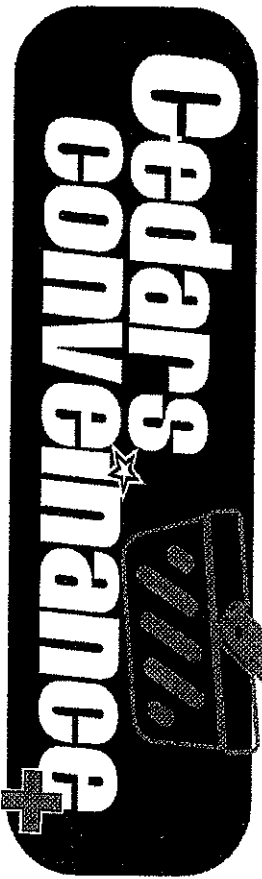
28in



74in

20.1 sqft

39in



3.6 sqft

12n

1x

FRONT FACIA OF BUILDING
 93'X12'=1116 SQFT OF FRONTAGE
 PROPOSED SIGNAGE IS =43.8 SQFT

ALL PANEL BACKS w/ PRE
 RAZED LETTER SCREEN w/
 STAINLESS STEEL 2" w/
 EVERY 2' AROUND PERIMETER.



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