



New Bedford, Massachusetts Motor Vehicle Special Permit APPLICATION

The undersigned petitions the City Council to grant a **SPECIAL PERMIT** in the manner and for the reasons hereinafter set forth under the provisions of the Zoning Ordinance to the following described premises:

DATE: 3/16/22

Type of service to be provided:

Sales and/or Rentals Body Repair General Repair Light Service

Owner/Landlord Information:

Thomas Vinagre
Full Legal Name

NAVIGATOR AUTOMOTIVE INC.
Company Name (if applicable)

1593 Cove Rd
Address

New Bedford, MA, 02740
City, State, Zip

508-264-9116
Phone Number

tommyvinagre@gmail
Email Address

OTHER Owner/Landlord Information: (if applicable)

Lessee Information: (if different from above)

Full Legal Name

Company Name

Address

City, State, Zip

Phone Number

Email Address

OTHER Lessee Information: (if applicable)

Location Information:

Address of Premises: 1593 Cove Road 02740
Street Number & Name Zip Code

Assessor's Plot: 17 299 13573 125
Plot # Lot # Book # Page #

Lot Dimensions: 88.74 100 6465
Frontage Depth Area in Sq. Ft.

Zoning District(s) in which premises are located: MUB

Premises in present ownership since: (date of purchase) 12/30/2020

Present use of premises: Auto General Repair

Number of buildings on Lot: 1 Size of existing building(s): 2,000 Sq. Ft.

Number of cars on premises at any given time: 15

Number of people on premises at any given time: 3

Size of proposed buildings (if applicable): _____

Extent of proposed alterations (if applicable): _____

Have plans been submitted to the Department of Inspectional Services? No
(Recorded Plans, accurately scaled as required by DIS, must be included with this application.)

Has the Department of Inspectional Services Commissioner refused to issue a permit? YES

If so, the reason: Special Permit Required

Signature Page:

A non-refundable filing fee is required when submitting the application, payable by cash, check or money order made payable to the City of New Bedford. The filing fee is non-refundable regardless of whether or not the petition is granted.

The FEE SCHEDULE as of January 2018:

Up to 10,000 square feet - \$700
10,001 - 20,000 square feet - \$800
20,001 - 30,000 square feet - \$900

If the petition is granted, the permission is specific to the plans submitted, unless the City Council states otherwise.

By signing this application, the Petitioner is stating that they have read and understand this application and the accompanying instructions and information. If granted, the Special Permit needs to be recorded and acted on within one year or the application process must begin again with a new, non-refundable fee.

I have read and understand this application and the accompanying instructions and information.

Respectfully submitted:

Owner Signature: 
(Must be the signature of the current owner on record.)

Date: 3/16/22

Lessee Signature: _____
(If the Lessee is a corporation, we must have a letter authorizing this person to sign on the corporation's behalf, on company letterhead.)

Date: _____

Representative Signature: _____
(Although not a requirement for submission, you may wish to contact an attorney to assist you with the application process.)

Date: _____

OTHER Owner Signature: _____

Date: _____

OTHER Lessee Signature: _____

Date: _____



New Bedford, Massachusetts
Motor Vehicle Special Permit
Department Signature Page

Business Name/Address: Navigator Automotive, Inc. / 1593 Cove Road

I do / do not consent to the application referenced above. I suggest the following conditions be included:

Anne Louro, Preservation Planner 04/11/2022
Planning Department Date

I do / do not consent to the application referenced above. I suggest the following conditions be included:

Permit must be recorded at the Registry of Deeds after the 20-day appeal period has expired and it is stamped by the City Clerk attesting to the fact, then a copy must be returned to room 308 and a permit will be issued from Inspectional Services (Room 308)

Danny Romanowicz 04/11/2022
D.I.S. Commissioner Date

I do / do not consent to the application referenced above. I suggest the following conditions be included:

Nicholas Nanopoulos 04/06/2022
Licensing Board Clerk Date

I do / do not consent to the application referenced above. I suggest the following conditions be included:

An MDC Trap must be installed and operating properly. The MDC Trap MUST be checked/cleaned by a professional company every 6 months. A copy of the receipt from the company inspecting/cleaning MUST be sent to the DPI IPP Office after each inspection/cleaning.

Wayne Perry, IPP Engineer 04/13/2022
Department of Public Infrastructure Date

I do / do not consent to the application referenced above. I suggest the following conditions be included:

Stephanie Macomber 04/08/2022
Asst. City Clerk Date



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 #	17
LOT(S)#	299
ADDRESS: 1593 Cove Road	
OWNER INFORMATION	
NAME: Thomas Vinagre	
MAILING ADDRESS: 1593 Cove Road New Bedford, MA 02740	
APPLICANT/CONTACT PERSON INFORMATION	
NAME (IF DIFFERENT):	
MAILING ADDRESS (IF DIFFERENT):	
TELEPHONE #	(508) 264-9116
EMAIL ADDRESS:	TOMMYVINAGRE@GMAIL.COM
REASON FOR THIS REQUEST: <i>Check appropriate</i>	
<input type="checkbox"/>	ZONING BOARD OF APPEALS APPLICATION
<input type="checkbox"/>	PLANNING BOARD APPLICATION
<input type="checkbox"/>	CONSERVATION COMMISSION APPLICATION
<input checked="" type="checkbox"/>	LICENSING BOARD APPLICATION
<input type="checkbox"/>	OTHER (<i>Please explain</i>):

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. Motta	Michael Motta <small>Digitally signed by Michael Motta Date: 2022.03.23 17:02:27 -04'00'</small>	3/23/2022
Printed Name	Signature	Date

Amount Due	\$5.00
Date Paid	3/21/2022
Confirmation Number	3809035

March 16, 2022

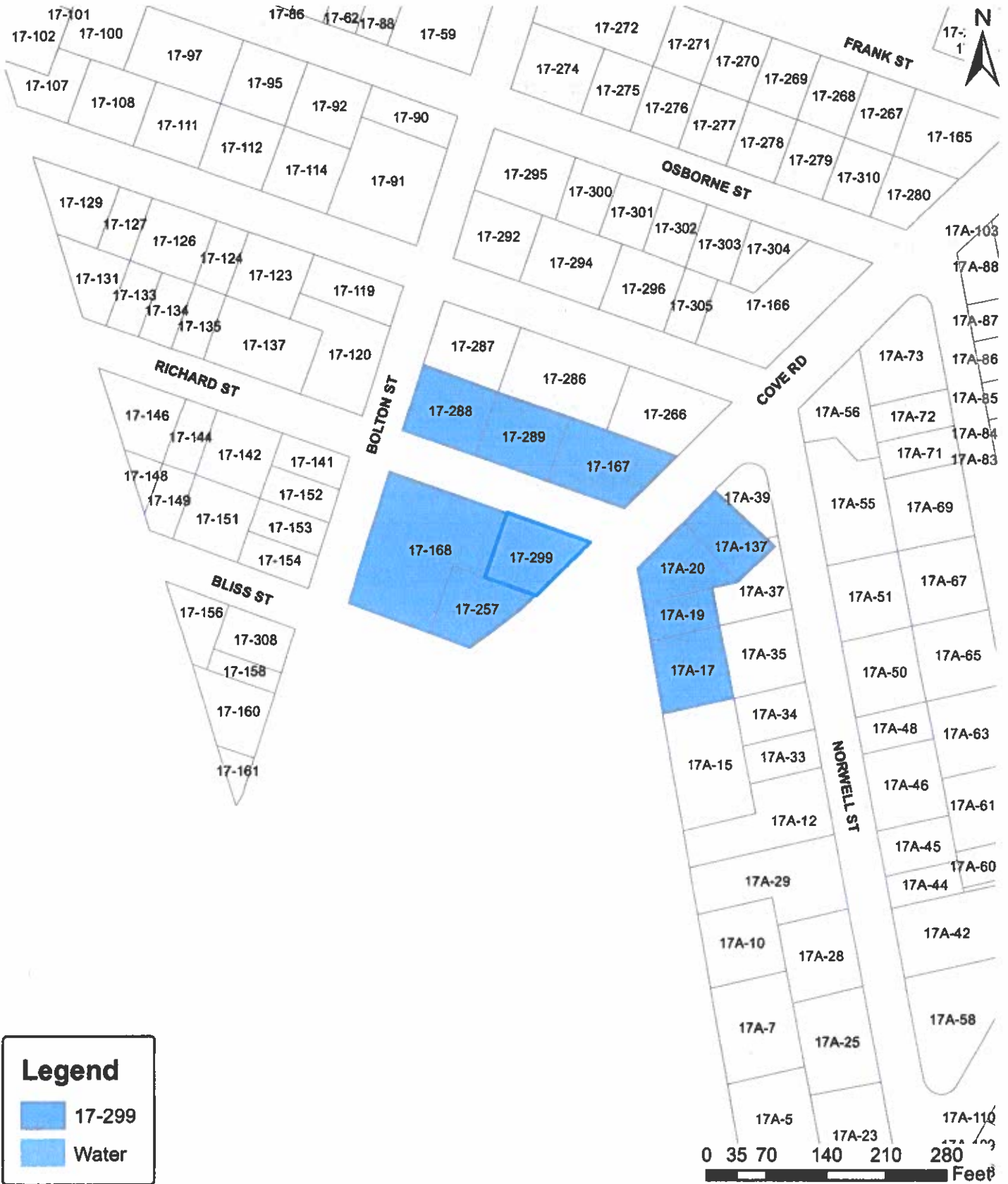
Dear Applicant,

Please find below the List of Abutters within 300 feet of the property known as 1593 Cove Road (Map: 17, Lot: 299). 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
17-168	145 BLISS ST	JAMINAC CORPORATION, P O BOX 387 WEST BRIDGEWATER, MA 02379
17A-19	93 TAYLOR ST	VICTORIA MARGINSON, 93 TAYLOR ST S. DARTMOUTH, MA 02748
17A-20	95 TAYLOR ST	TAVARES HENRY C, TAVARES JOHN C 95 TAYLOR ST S. DARTMOUTH, MA 02748
17-299	1593 COVE RD	NAVIGATOR AUTOMOTIVE INC, 114 OSBORNE STREET DARTMOUTH, MA 02747
17-167	1579 COVE RD	GOMES ANTONE JR, GOMES DOLORES 198 ROCKLAND ST S. DARTMOUTH, MA 02748
17-289	NS RICHARDS ST	GOMES ANTONE JR, GOMES DOLORES C 198 ROCKLAND ST S. DARTMOUTH, MA 02748
17-288	194 BOLTON ST	CABRAL DONALDO C M, CABRAL NORMANDA M 194 BOLTON ST NEW BEDFORD, MA 02740
17-257	1615 COVE RD	SALCO AUTO SALES LLC C/O CLAUDIA FAIA-MANAGING MEMBER 37 WEYMOUTH AVENUE WES ROXBURY, MA 02132
17A-137	1578 COVE RD	LANGILL WILLARD K JR "TRUSTEE" WILLARD K LANGILL JR LIVING TRUST 1578 COVE RD NEW BEDFORD, MA 02740
17A-17	87 TAYLOR ST	CAMPOS NELSON A, CAMPOS MARIA C 87 TAYLOR ST S. DARTMOUTH, MA 02748

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



Legend

-  17-299
-  Water

City of New Bedford, Massachusetts
Department of City Planning

Parcel within 300FT



March 2022

COMMITTEE ON APPOINTMENTS & BRIEFINGS

RECEIPT

DATE: 3/30/2022

OWNER(S): Thomas Vinagre

BUSINESS NAME: Navigator Automotive Inc.

BUSINESS ADDRESS: 1593 Cove Rd.

FOR MOTOR VEHICLE: Sales and/or Rentals

Body Repair

General Repair

Light Service

AMOUNT RECEIVED: Seven Hundred Dollars (\$700.00)

Angelic Taylor

Angelic Taylor
Administrative Coordinator



Bk: 13573 Pg: 125 Pg: 1 of 2 BS
Doc: DEED 12/30/2020 02:44 PM

QUITCLAIM DEED

MASSACHUSETTS EXCISE TAX
Bristol ROD South 001
Date: 12/30/2020 02:44 PM
Ctrl# 032616 20918 Doc# 00033958
Fee: \$889.20 Cons: \$195,000.00

I, Ronald Mello, of 13 Gifford Street, Dartmouth, Massachusetts, in consideration of One Hundred and Ninety-five Thousand and 00/100 (\$195,000.00) Dollars hereby grant to Navigator Automotive, Inc., a Massachusetts corporation, of 114 Osborne Street, Dartmouth, Massachusetts, with QUITCLAIM COVENANTS, the following described premises:

The land with any buildings thereon, in said New Bedford, bounded and described as follows:

BEGINNING at the northeasterly corner of the premises herein conveyed at the intersection of the southerly line of Richards Street with the northwesterly line of Cove Road;

thence SOUTH 45° 37' 55" WEST in said line of Cove Road, eighty-eight and 74/100 (88.74) feet to land now or formerly of Arthur M. Thomas, et ux;

thence NORTH 69° 59' 20" WEST in line of last-named land, sixty-one and 63/100 (61.63) feet to Easement "A" as shown on plan of land hereinafter mentioned;

thence NORTH 20° 00' 40" EAST in line of said easement, eighty and 01/100 (80.01) feet to said line of Richards Street; and

thence SOUTH 69° 59' 20" EAST in said line of Richards Street, one hundred (100) feet to the point of beginning.

CONTAINING 6,465 square feet, more or less.

BEING Lot A as shown on plan of land in New Bedford, Mass. owned by Seraphin D.O. and Alice R. Marotte dated February 12, 1976 to be filed herewith.

Together with an easement twenty-eight (28) feet in width and shown as Easement "A" on said plan to be filed herewith.

Reserving to Alice R. Marotte an easement over the area designated as Easement "B" as shown on the foregoing plan.

For title see deed of Alice R. Marotte dated March 15, 1976 and recorded in the Bristol County (S.D.) Registry of Deeds at Book 1715, Page 398. Carol Mello died on

Property Address: 1593 Cove Road, New Bedford, MA

MOSES

WITNESS my hand and seal this 30th day of December, 2020.

Ronald Mello
Ronald Mello

COMMONWEALTH OF MASSACHUSETTS

Bristol, ss.

On December 30, 2020, before me, the undersigned Notary Public, personally appeared Ronald Mello, proved to me through satisfactory evidence of identification, which was photographic identification with signature issued by a federal or state governmental agency, oath or affirmation of a credible witness, personal knowledge of the undersigned, to be the person whose name is signed above, and acknowledged to me that he signed it voluntarily for its stated purpose and it was his free act and deed.

[Signature]
Notary Public
My Commission Expires: JAN. 17, 2021



A true copy of instrument as recorded in
Bristol County (S.D.) Registry of Deeds
in Book 13573 Page 125
ATTEST: [Signature]
REGISTER

A true copy of instrument as
Bristol County (S.D.) Regis:
in Book _____ Page _____
ATTEST: [Signature]
REGISTE

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 _____

X. CONSTRUCTION DEBRIS DISPOSAL

Supplement #2

In accordance with provisions of Massachusetts General Law C40, 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: Dumpster (Location of Facility)

Signature of Permit Applicant _____ Date 3/16/22

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: Auto Repair Est. Cost _____

Address of Work: 1593 Car Rd NB MA 02740

Owner Name: Thomas Linogr 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 3/16/22 Owner Signature _____

XII. BUILDING COMMISSIONERS REVIEW COMMENTS AND CONDITIONS

C. Building Permit Rejected **City Council - Special Permit**

Reason For Rejection:

"See Attachments"

B-22-578

Comments and Conditions:

Signed Danny A. Romanowicz Date: 3-21 2022
Title Building Commissioner

Not valid unless signed (not stamped) by Building Commissioner



CITY OF NEW BEDFORD
JONATHAN F. MITCHELL, MAYOR

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

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

1593 Cove Road – PLOT: 17 – LOT: 299 – ZONED DISTRICT: MUB
Special Permit Required from the City Council

Zoning Code Review as follows:

Special Permit

City Council

- ❖ **2000 – Use and Dimensional Regulations**
 - **2200 – Use Regulations**
 - **2210 – General**
 - **2230 – Table of Principal Use Regulations – Appendix A**
 - ♦ **Commercial - #19. Motor vehicle general repairs**
 - ♦ **Commercial - #21. Motor vehicle light service**
- ❖ **5000 – Administration and Procedures**
 - **5300-5330 & 5360-5390 – Special Permit**

Notes to all Boards

- ♦ **The storage of vehicles within the garage space will require a MDC Trap as per 248 CMR 10.09 (b) Separation or Containment of Gas, Oil, and Other Petroleum Distillates.**

2200. - USE REGULATIONS.

2210. General. No structure shall be erected or used or land used except as set forth in Section 2230, "Table of Use Regulations", unless otherwise provided by this Ordinance or by statute. Uses not expressly provided for herein are prohibited. Not more than one principal structure shall be placed on a lot, except in accordance with Section 2330.

Symbols employed below shall mean the following:

Y - A permitted use.

N - An excluded or prohibited use.

BA - A use authorized under special permit from the Board of Appeals as provided under Section 5300.

CC - A use authorized under special permit from the City Council as provided under Section 5300.

PB - A use authorized under special permit from the Planning Board as provided under Section 5300.

2220. Applicability. When an activity might be classified under more than one of the following uses, the more specific classification shall govern; if equally specific, the more restrictive shall govern.

2230. Table of Use Regulations. See Appendix A.

(Ord. of 12-23-03, § 1)

5300. - SPECIAL PERMITS.

5310. Special Permit Granting Authority. The Zoning Board of Appeals, the Planning Board or the City Council shall act as the Special Permit Granting Authority under this Chapter as specifically designated in a particular Section or in accordance with the Specific Designations in the Table of Principal Use Regulations under Appendix A of this Chapter.

(Ord. of 12-23-03, § 1; Ord. of 12-8-05, § 1)

5320. Criteria. Special permits shall be granted by the special permit granting authority, unless otherwise specified herein, only upon its written determination that the benefit to the City and the neighborhood outweigh the adverse effects of the proposed use, taking into account the characteristics of the site and of the proposal in relation to that site. In addition to any specific factors that may be set forth in this Ordinance, the determination shall include consideration of each of the following:

5321. Social, economic, or community needs which are served by the proposal;

5322. Traffic flow and safety, including parking and loading;

5323. Adequacy of utilities and other public services;

5324. Neighborhood character and social structures;

5325. Impacts on the natural environment; and

5326. Potential fiscal impact, including impact on City services, tax base, and employment.

(Ord. of 12-23-03, § 1)

5330. Procedures. Applications for special permits shall be filed in accordance with the rules and regulations of the various special permit granting authorities, as may be applicable.

(Ord. of 12-23-03, § 1)

5340. Plans. An applicant for a special permit shall submit a plan in substantial conformance with the requirements of Section 5400, herein.

(Ord. of 12-23-03, § 1)

5350. Development Impact Statement (DIS). At the discretion of the special permit granting authority, the submittal of a development impact statement (DIS) may be required. The DIS shall be prepared by an interdisciplinary team including a Registered Landscape Architect or Architect, a Registered Professional or Civil Engineer, and a Registered Surveyor.

5351. Physical Environment.

- (a) Describe the general physical conditions of the site, including amounts and varieties of vegetation, general topography, unusual geologic, archeological, scenic and historical features or structures, location of significant viewpoints, stone walls, trees over sixteen (16) inches in diameter, trails and open space links, and indigenous wildlife.
- (b) Describe how the project will affect these conditions, providing a complete physical description of the project and its relationship to the immediate surrounding area.

5352. Surface Water and Subsurface Conditions.

- (a) Describe location, extent, and type of existing water and wetlands, including existing surface drainage characteristics, both within and adjacent to the site.
- (b) Describe any proposed alterations of shore lines, marshes, or seasonal wet areas.
- (c) Describe any limitations imposed on the project by the site's soil and water conditions.
- (d) Describe the impact upon ground and surface water quality and recharge, including estimated phosphate and nitrate loading on groundwater and surface water from septic tanks, lawn fertilizer, and other activities within the site.

5353. Circulation Systems.

Project the number of motor vehicles to enter depart the site per average day and peak hour. Also state the number of motor vehicles to use streets adjacent to the site per average day and peak hour. Such data shall be sufficient to enable the special permit granting authority to evaluate (i)

existing traffic on streets adjacent to or approaching the site, (ii) traffic generated or resulting from the site, and (iii) the impact of such additional traffic on all ways within and providing access to the site. Actual study results, a description of the study methodology, and the name, address, and telephone number of the person responsible for implementing the study, shall be attached to the DIS.

5354. Support Systems.

- (a) **Water Distribution:** Discuss the types of wells or water system proposed for the site, means of providing water for firefighting, and any problems unique to the site.
- (b) **Sewage Disposal:** Discuss the type of on-site or sewer system to be used, suitability of soils, procedures and results of percolation tests, and evaluate impact of disposal methods on surface and groundwater.
- (c) **Refuse Disposal:** Discuss the location and type of facilities, the impact on existing City refuse disposal capacity, hazardous materials requiring special precautions.
- (d) **Fire Protection:** Discuss the type, location, and capacity of fuel storage facilities or other flammables, distance to fire station, and adequacy of existing firefighting equipment to confront potential fires on the proposed site.
- (e) **Recreation:** Discuss the distance to and type of public facilities to be used by residents of the proposed site, and the type of private recreation facilities to be provided on the site.
- (f) **Schools:** Project the increase to the student population for nursery, elementary, junior high school, and high school levels, also indicating present enrollment in the nearest public schools serving these categories of students.

5355. Phasing. Where development of the site will be phased over more than one year, indicate the following:

- (a)

Describe the methods to be used during construction to control erosion and sedimentation through use of sediment basins, mulching, matting, temporary vegetation, or covering of soil stockpiles. Describe the approximate size and location of portion of the parcel to be cleared at any given time and length of time of exposure.

- (b) Describe the phased construction, if any, of any required public improvements, and how such improvements are to be integrated into site development.

(Ord. of 12-23-03, § 1)

5360. Conditions. Special permits may be granted with such reasonable conditions, safeguards, or limitations on time or use, including performance guarantees, as the special permit granting authority may deem necessary to serve the purposes of this Ordinance.

(Ord. of 12-23-03, § 1)

5370. Lapse. Special permits shall lapse if a substantial use thereof or construction thereunder has not begun, except for good cause, within twelve (12) months following the filing of the special permit approval (plus such time required to pursue or await the determination of an appeal referred to in M.G.L.A. c. 40A, § 17, from the grant thereof) with the City Clerk.

(Ord. of 12-23-03, § 1)

5380. Regulations. The special permit granting authority may adopt rules and regulations for the administration of this Section.

(Ord. of 12-23-03, § 1)

5390. Fees. The special permit granting authority may adopt reasonable administrative fees and technical review fees for applications for special permits.

(Ord. of 12-23-03, § 1)

State Law reference— Special permits, M.G.L.A. c. 40A, § 9.

Permit No. **B-22-578**
Completion Date



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

FOR BUILDING DEPT. USE

DATE RECEIVED: _____
RECEIVED BY: _____
ISSUED BY: **AR 6 2022**
OK

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

(A) LOCATION: 1593 Cove Road
(NO) (STREET)
BETWEEN _____ AND _____
(CROSS STREET) (CROSS STREET)
PLOT 17 LOT 299 DISTRICT HUB ACCEPTED 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-19 - D-32)
6 Moving (relocation) **Motor Vehicle Repair**
7 Foundation only

D.1. PROPOSED USE - For demolition most recent use
Residential
13 One family
14 Two or more family - Enter number of units _____
15 Transient hotel, motel, or dormitory - Enter number _____
16 Garage
17 Carport
18 Other - Specify _____
Nonresidential
19 Amusement, recreational
20 Child, other religious
21 Industrial
22 Plating garage
23 Service station, repair garage
24 Hospital, institutional
25 Office, bank, professional
26 Public utility
27 School, library, other educational
28 Store, mercantile
29 Tank, tankers
30 Funeral home
31 Food establishment
32 Other - Specify _____

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

D.2. Does this building contain asbestos?
 YES NO if yes complete the following.
Name & Address of Asbestos Removal Firm: _____
Submit copy of notification sent to DEP and the State Dept. of Labor & Industries and results of all sample analyses after asbestos removal is completed.

C. COST (Omit cents)
10. Cost of construction 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 _____

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.

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.

E. PRINCIPAL TYPE OF FRAME
33 Masonry (wall bearing)
34 Wood frame
35 Structural steel
36 Reinforced concrete
37 Other - Specify _____

G. TYPE OF SEWAGE DISPOSAL
43 Public or private company
44 Private (septic tank, etc.)

J. DIMENSIONS
53 Number of stories _____
54 Height _____
55 Total square feet of floor area, all floors based on exterior dimensions _____
56 Building length _____
57 Building width _____
58 Total sq. ft. of bldg. footprint _____
59 Front lot line width _____
60 Rear lot line width _____
61 Depth of lot _____
62 Total sq. ft. of lot size _____
63 % of lot occupied by bldg (56+62) _____
64 Distance from lot line (front) _____
65 Distance from lot line (rear) _____
66 Distance from lot line (left) _____
67 Distance from lot line (right) _____

H. TYPE OF WATER SUPPLY
45 Public or private company
46 Private (well, cistern)

F. PRINCIPAL TYPE OF HEATING FUEL
38 Gas
39 Oil
40 Electricity
41 Coal
42 Other - Specify _____

I. TYPE OF MECHANICAL
Is there a fire sprinkler system?
47 YES 48 NO
Will there be central air conditioning?
49 Yes 50 No
Will there be an elevator?
51 Yes 52 No

OTHER APPLICABLE REVIEWS

K. FLOODPLAIN

Is location within flood hazard area? yes
 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? _____

IV. IDENTIFICATION - ALL APPLICANTS - PLEASE PRINT			
OWNER OR LESSEE NAME	MAILING ADDRESS	ZIP CODE	TELEPHONE NO.
Thomas Vinagre Navigator Architects FX.	1593 Cove Rd NB, MA	02740	508-264-9000
E-mail Address: Tommyvinagre@gmail			
CONTRACTOR NAME	MAILING ADDRESS	ZIP CODE	TELEPHONE NO.
		LICENSE #	
E-mail Address:		HOME RESP #	
ARCHITECT NAME	MAILING ADDRESS	ZIP CODE	TELEPHONE NO.
		LICENSE #	
E-mail Address:			
SIGNATURE OF OWNER	APPLICANT SIGNATURE		DATE
			3/16/22

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.

1593 Cove Rd New Bedford
 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: _____ 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.

Utica National Insurance 5494328
 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 MOL 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 TR day of March 16, 2022



The Commonwealth of Massachusetts
 Department of Industrial Accidents
 1 Congress Street, Suite 100
 Boston, MA 02114-2017
 www.mass.gov/dia

Workers' Compensation Insurance Affidavit: Builders/Contractors/Electricians/Plumbers.
 TO BE FILED WITH THE PERMITTING AUTHORITY.

Applicant Information

Please Print Legibly

Name (Business/Organization/Individual): Melignone Automotive Inc.

Address: 1593 Cove Rd

City/State/Zip: New Bedford MA 02840 Phone #: 508-264-9116

Are you an employer? Check the appropriate box:

- 1. I am an employer with 2 employees (full and/or part-time).*
- 2. I am a sole proprietor or partnership and have no employees working for me in any capacity. (No workers' comp. insurance required.)
- 3. I am a homeowner doing all work myself. (No workers' comp. insurance required.)†
- 4. I am a homeowner and will be hiring contractors to conduct all work on my property. I will ensure that all contractors either have workers' compensation insurance or are sole proprietors with no employees.
- 5. I am a general contractor and I have hired the sub-contractors listed on the attached sheet. These sub-contractors have employees and have workers' comp. insurance.‡
- 6. We are a corporation and its officers have exercised their right of exemption per MGL c. 152, §1(4), and we have no employees. (No workers' comp. insurance required.)

Type of project (required):

- 7. New construction
- 8. Remodeling
- 9. Demolition
- 10. Building addition
- 11. Electrical repairs or additions
- 12. Plumbing repairs or additions
- 13. Roof repairs
- 14. Other change of use

*Any applicant that checks box #1 must also fill out the section below showing their workers' compensation policy information.

†Homeowners who submit this affidavit indicating they are doing all work and then hire outside contractors must submit a new affidavit indicating such

‡Contractors that check this box must attached an additional sheet showing the name of the sub-contractors and state whether or not those entities have employees. If the sub-contractors have employees, they must provide their workers' comp. policy number.

I am an employer that is providing workers' compensation insurance for my employees. Below is the policy and job site information.

Insurance Company Name: Unica National Insurance

Policy # or Self-ins. Lic. #: 5494308 Expiration Date: 1/4/23

Job Site Address: 1593 Cove Rd City/State/Zip: New Bedford, MA 02840

Attach a copy of the workers' compensation policy declaration page (showing the policy number and expiration date).

Failure to secure coverage as required under MGL c. 152, §25A is a criminal violation punishable by a fine up to \$1,500.00 and/or one-year imprisonment, as well as civil penalties in the form of a STOP WORK ORDER and a fine of up to \$250.00 a day against the violator. A copy of this statement may be forwarded to the Office of Investigations of the DIA for insurance coverage verification.

I do hereby certify under the pains and penalties of perjury that the information provided above is true and correct.

Signature: [Signature] Date: 3/16/22

Phone #: 508-264-9116

Official use only. Do not write in this area, to be completed by city or town official.

City or Town: _____ Permit/License # _____

Issuing Authority (circle one):

- 1. Board of Health 2. Building Department 3. City/Town Clerk 4. Electrical Inspector 5. Plumbing Inspector
- 6. Other _____

Contact Person: _____ Phone #: _____

Corporations Division

Business Entity Summary

ID Number: 001389136

[Request certificate](#)

[New search](#)

Summary for: **NAVIGATOR AUTOMOTIVE, INC.**

The exact name of the Domestic Profit Corporation: NAVIGATOR AUTOMOTIVE, INC.		
Entity type: Domestic Profit Corporation		
Identification Number: 001389136		
Date of Organization in Massachusetts: 06-18-2019		
Last date certain:		
Current Fiscal Month/Day: 12/31		
The location of the Principal Office:		
Address: 114 OSBORNE ST.		
City or town, State, Zip code, S. DARTMOUTH, MA 02748 USA		
Country:		
The name and address of the Registered Agent:		
Name: THOMAS D. VINAGRE		
Address: 114 OSBORNE ST.		
City or town, State, Zip code, S. DARTMOUTH, MA 02748 USA		
Country:		
The Officers and Directors of the Corporation:		
Title	Individual Name	Address
PRESIDENT	THOMAS D VINAGRE	114 OSBORNE ST S. DARTMOUTH, MA 02748 USA
TREASURER	ASHLEY E CUNHA	114 OSBORNE ST S. DARTMOUTH, MA 02748 USA
SECRETARY	ASHLEY E CUNHA	114 OSBORNE ST S. DARTMOUTH, MA 02748 USA
VICE PRESIDENT	TOMAS M. VINAGRE	49 PINE RIDGE ST. NEW BEDFORD, MA 02745 USA
DIRECTOR	THOMAS D VINAGRE	114 OSBORNE ST S. DARTMOUTH, MA 02748 USA
DIRECTOR	ASHLEY E CUNHA	114 OSBORNE ST S. DARTMOUTH, MA 02748 USA
DIRECTOR	TOMAS M. VINAGRE	49 PINE RIDGE ST. NEW BEDFORD, MA 02745 USA
Business entity stock is publicly traded:		
The total number of shares and the par value, if any, of each class of stock which this business entity is authorized to issue:		



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
01/11/2022

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must have ADDITIONAL INSURED provisions or be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER FLAGSHIP INSURANCE AGENCY INC 651 ORCHARD ST, SUITE 301 PO BOX 40388 NEW BEDFORD MA 02744		ERIC QUINN Phone: (508) 994-8588 FAX: (508) 991-5481 Email: equinn@flagshipins.com	
INSURED Navigator Automotive Inc 114 Osborn Street South Dartmouth MA 02748		INSURER(S) AFFORDING COVERAGE	
		INSURER A: Burlington Insurance Co	NAC #
		INSURER B: Safety Indemnity	33618
		INSURER C: Utica National Insurance Company of Texas	43478
		INSURER D:	
		INSURER E:	
		INSURER F:	

COVERAGES CERTIFICATE NUMBER: 22-23 Master REVISION NUMBER:


THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

TYPE	TYPE OF INSURANCE	MODEL NUMBER (MND)	YEAR (WYD)	POLICY NUMBER	POLICY EFF. DATE (MM/DD/YYYY)	POLICY EXP. DATE (MM/DD/YYYY)	LIMITS
A	COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input type="checkbox"/> OCCUR <input checked="" type="checkbox"/> Garage Operations Liability GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER:			PENDING	01/20/2022	01/20/2023	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (EA occurrence) \$ MED EXP (Any one person) \$ PERSONAL & ADV INJURY \$ GENERAL AGGREGATE \$ 1,000,000 PRODUCTS - COMP/OP AGG \$ \$
B	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> OWNED AUTOS ONLY <input type="checkbox"/> HIRED AUTOS ONLY <input checked="" type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> NON-OWNED AUTOS ONLY			COM6820230	02/12/2021	02/12/2022	COMBINED SINGLE LIMIT (EA accident) \$ BODILY INJURY (Per person) \$ 100,000 BODILY INJURY (Per accident) \$ 300,000 PROPERTY DAMAGE (Per person) \$ \$
	UMBRELLA LIAB <input type="checkbox"/> OCCUR EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED <input type="checkbox"/> RETENTION \$						EACH OCCURRENCE \$ AGGREGATE \$ \$
C	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	Y/N	N/A	5494328	01/04/2022	01/04/2023	PER STATUTE <input type="checkbox"/> OTH-ER <input type="checkbox"/> E.L. EACH ACCIDENT \$ 500,000 E.L. DISEASE - EA EMPLOYEE \$ 500,000 E.L. DISEASE - POLICY LIMIT \$ 500,000
A	Garagekeepers Liability			PENDING	01/20/2022	01/20/2023	Limit \$60,000 Comp/Colt deduct \$1000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

CERTIFICATE HOLDER

CANCELLATION

City of New Bedford 133 William Street New Bedford MA 02740	SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS. AUTHORIZED REPRESENTATIVE 
---	--

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Location: 1593 COVE RD **Parcel ID:** 17 299 **Zoning:** MUB **Fiscal Year:** 2022 **Account Number:** 26614

Current Owner Information:
 NAVIGATOR AUTOMOTIVE INC

114 OSBORNE STREET
 DARTMOUTH , MA 02747

Current Sales Information:

Sale Date:
 12/30/2020
Sale Price:
 \$195,000.00
Legal Reference:
 13573-125
Grantor:
 MELLO, RONALD

Card No. 1 of 1

This Parcel contains 0.14842 acres of land mainly classified for assessment purposes as AUTOREP with a(n) COMMERCIAL GARAGE style building, built about 1972, having Metal exterior, Metal and Tin roof cover and 2000 Square Feet, with 1 unit(s), total room(s), total bedroom(s) total bath(s), 0 3/4 baths, and 1 total half bath(s).

Building Value:	Land Value:	Yard Items Value:	Total Value:
74900	102100	0	177000



Fiscal Year 2022		Fiscal Year 2021		Fiscal Year 2020	
Tax Rate Res.:	15.54	Tax Rate Res.:	15.59	Tax Rate Res.:	16.16
Tax Rate Com.:	33.51	Tax Rate Com.:	32.76	Tax Rate Com.:	33.59
Property Code:	332	Property Code:	332	Property Code:	332
Total Bldg Value:	74900	Total Bldg Value:	74900	Total Bldg Value:	66500
Total Yard Value:	0	Total Yard Value:	0	Total Yard Value:	0
Total Land Value:	102100	Total Land Value:	96700	Total Land Value:	96700
Total Value:	177000	Total Value:	171600	Total Value:	163200
Tax:	\$5,931.27	Tax:	\$5,621.62	Tax:	\$5,481.89

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.



City of New Bedford
 Massachusetts
 Map: 017
 Planning Department
 January 2018

Legend:
 • Boundary
 • Platrol Subdivision
 • Combined Plats
 • Master Parcel Listing to Assessing CD
 • Assessed Parcel



Water Bodies
 Town Boundary
 Engineering Lot Number
 Lot Area

1 inch = 100 feet
 0 20 40 80 feet

Plan No. 017
 The map and information herein are
 the property of the City of Bedford, Massachusetts.

0 500 1000 feet
 0 100 200 300 feet

1:2500
 0 25 50 75 100 feet

8726

90

RICHARD ST

89.89
BUS. 85 FT.

143.7

BUSINESS

100

80.01

168
19462

299
6465

88.74

98.28

61.63

COVER RD

27.13

BUS.

257
6027

80

66.95

US.

49.14

ST

1812 Cover Rd

Legend

1593 & 1615 Cove Road

1593 Cove Road - General Auto Repair & Light Services
1615 Cove Road - Auto Sales up to 19 Cars Allowed



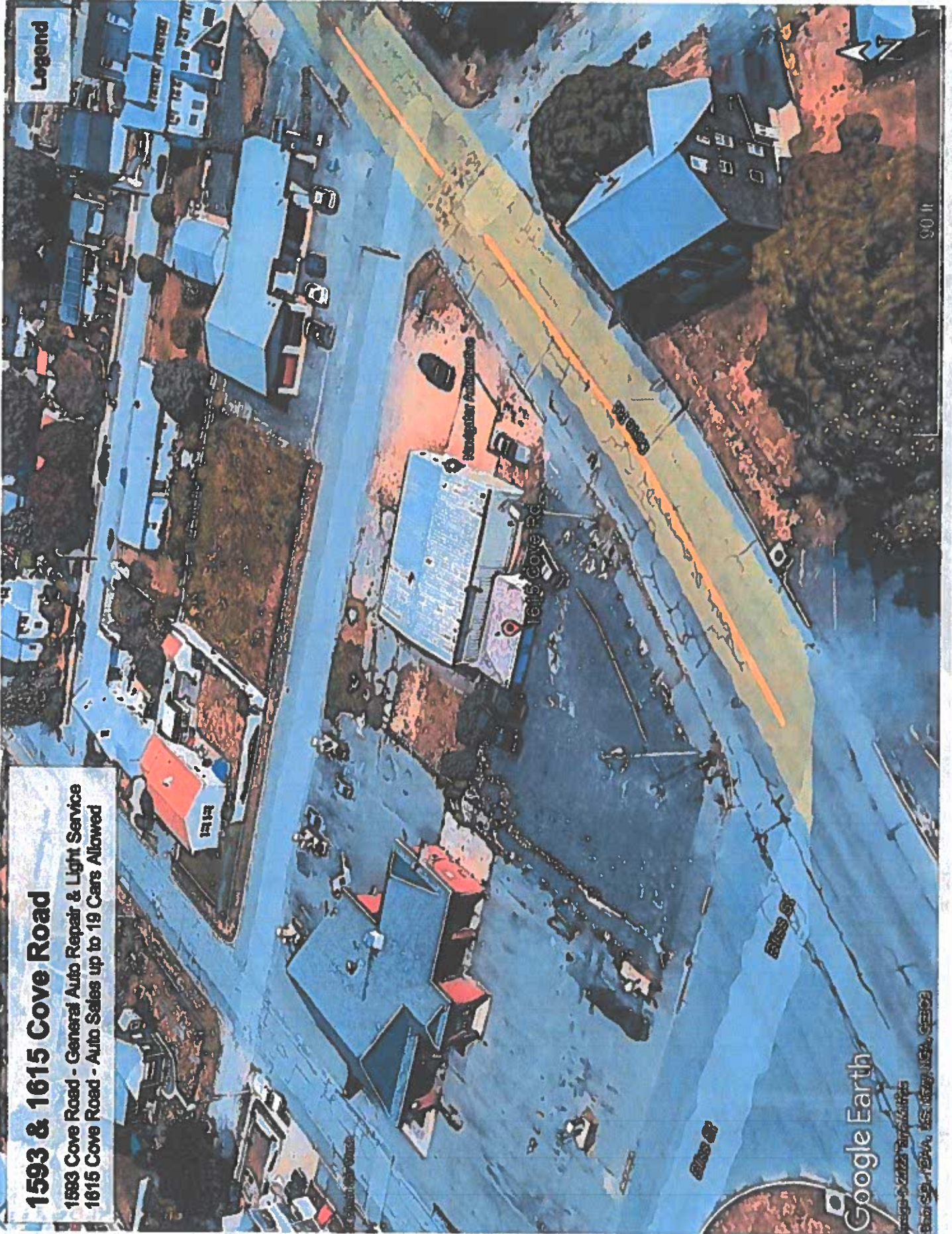
Google Earth

Image © 2008 Google

Data © 2008, US Navy, NASA, GEBCO

Legend

1593 & 1615 Cove Road
1593 Cove Road - General Auto Repair & Light Service
1615 Cove Road - Auto Sales up to 19 Cars Allowed



Google Earth

© 2008 Google
8500 S. ZEEB RD, SUITE 100, SANDWICH, GA 31328

90 ft

Legend

1593 & 1615 Cove Road
1593 Cove Road - General Auto Repair & Light Service
1615 Cove Road - Auto Sales up to 19 Cars Allowed



80 ft

Google Earth

Images © 2022 Earthstar
Data © 1994, USGS, 1999-2004, GEBCO

Legend

1593 & 1615 Cove Road

- 1593 Cove Road - General Auto Repair & Light Service
- 1615 Cove Road - Auto Sales up to 19 Cars Allowed



Google Earth

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90 ft

1593 & 1615 Cove Road

1683 Cove Road - General Auto Repair & Light Service
1615 Cove Road - Auto Sales up to 19 Cars Allowed

Legend



70 ft

Richard St

Richard St

1615 Cove Rd

Maximacy Auto Center

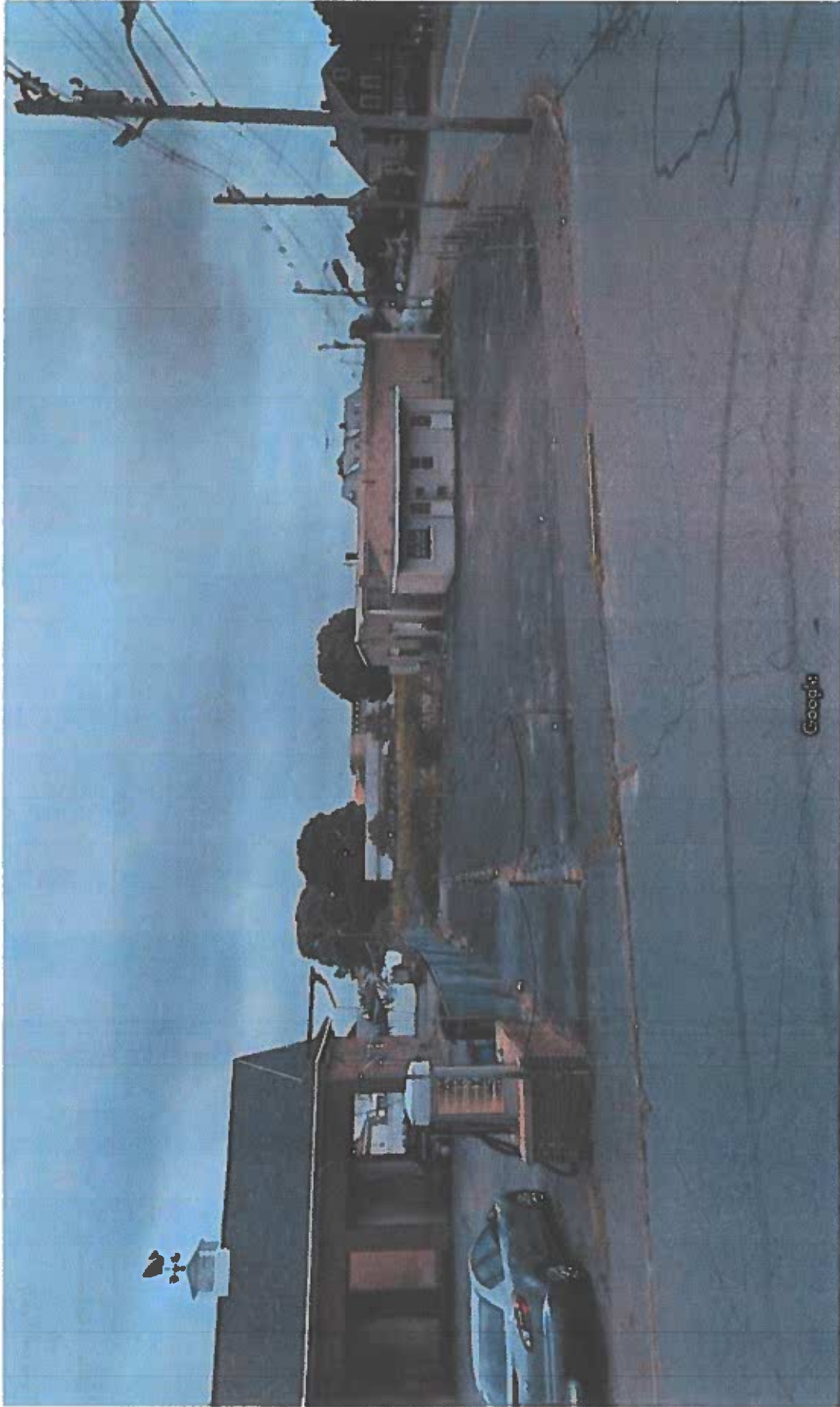
Cove Rd

Taylor St

Google Earth

© 2010 Google





Google Maps 1698 Cove Rd



Image captured Aug 2017 © 2022 Google

New Bedford, Massachusetts

Google

Street View - Aug 2017





Image captured Aug 2017 © 2022 Google

New Bedford, Massachusetts 01923

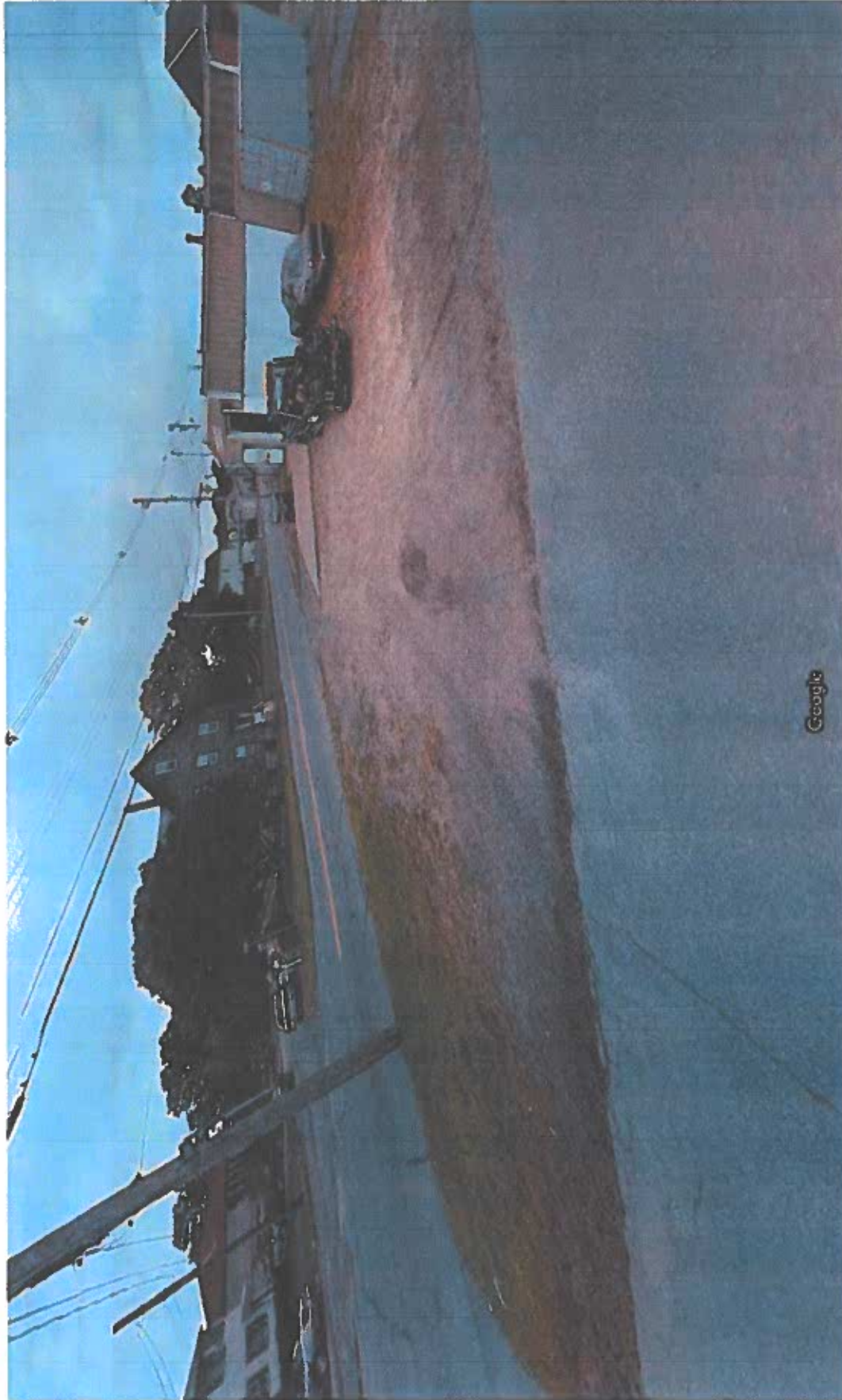
Google

Street View - Aug 2017









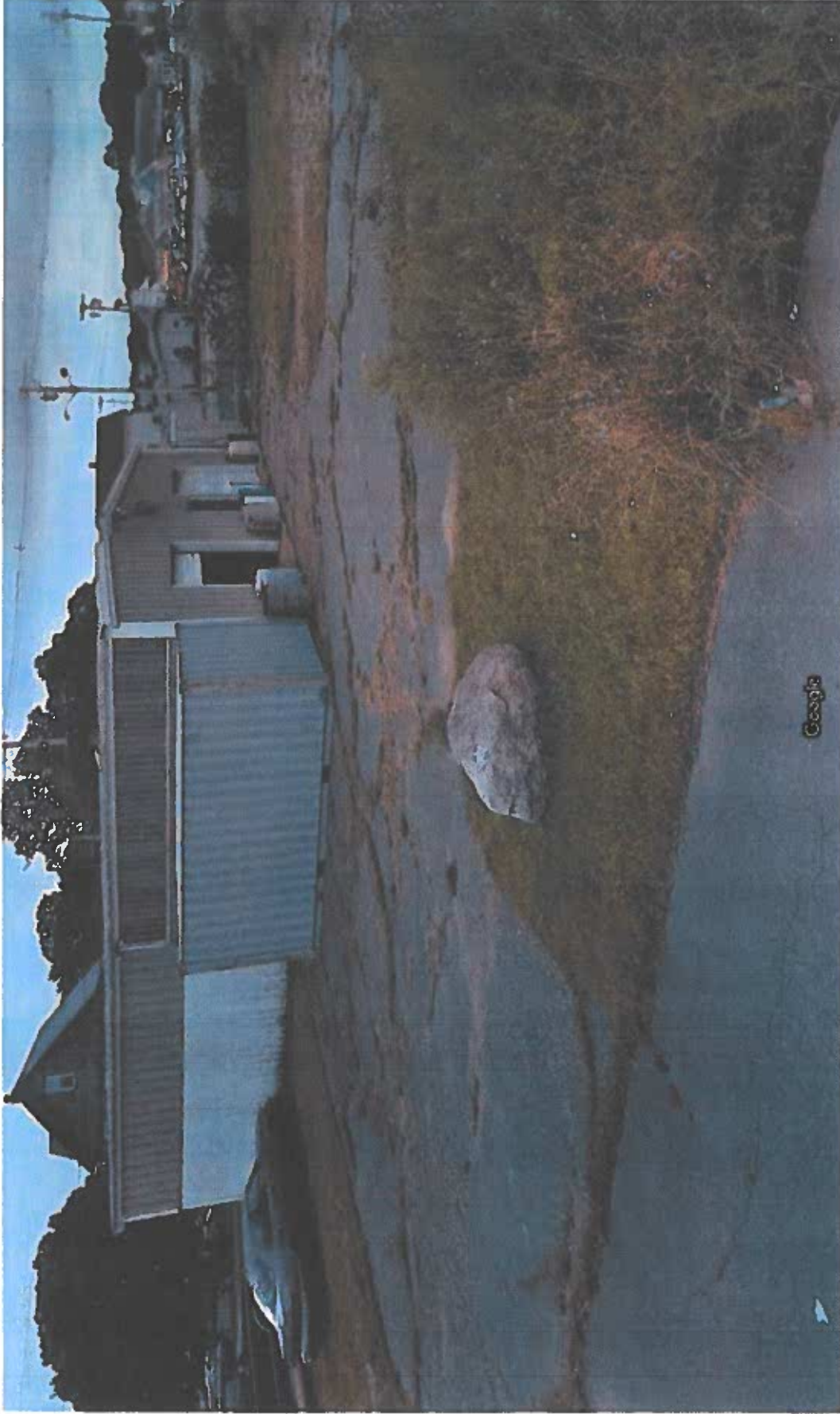


Image capture Sep 2012 © 2012 Google

New Bedford, Massachusetts

Google

Street View - Sep 2012



Google Maps 30 Richard St



Image captured Sep 2012 © 2012 Google

New Bedford, Massachusetts

Google

Street View - Sep 2012

