

TOWN OF SCITUATE COMMONWEALTH OF MASSACHUSETTS RENEWAL----- APPLICATION FOR DRAINLAYER'S LICENSE 2024

The undersigned hereby applies for a license as a Master Drainlayer as per the Rules and Regulations amended in 2021 by the Board of Selectmen.

Address: (Street) (City) (Zip) Telephone: (Office) (Cell) (E-mail) And in consideration of such license the Town of Scituate is exonerated from all liability growing out of this licer and hereby agrees to save the Town harmless from any damage upon doing any work under this license, and, further, that I will in all respects conform to the Rules & Regulations established by the Board of Selectmen. License Application: Date Signature of Applicant JOB LOCATION: LICENSE REQUIREMENTS Please include copies of the insurance certificates listed below, complete the Worker's Compensati Affidavit and submit three (3) references. General Liability \$1,000,000 Each Occurrence Expiration Date Hire Damage \$100,000 Expiration Date Worker's Comp \$100,000 Expiration Date Worker's Comp Affidavit Date Signed: Date Worker's Comp Affidavit Date Signed: Date Bond ****3 WRITTEN REFERENCES**** LICENSE FEE Please enclose a check in the appropriate amount payable to the Town Of Scituate along with this application New Application Fee: \$200.00 New Application Fee: \$200.00 Renewal Application Fee: \$200.00 New Application Fee: \$200.00 Renewal Applicat	Name:				-
Telephone: (Office) (Cell) (E-mail) And in consideration of such license the Town of Scituate is exonerated from all liability growing out of this licer and hereby agrees to save the Town harmless from any damage upon doing any work under this license, and, further, that I will in all respects conform to the Rules & Regulations established by the Board of Selectmen. License Application:	Address:				_
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Fire Damage \$ 100,000 Expiration Date	Please include copies of the in	surance certificates liste	d below, comp	-	sation
Auto Combined Single \$ 500,000 Expiration Date	General Liability	\$1,000,000 Each	Occurrence	Expiration Date	
Worker's Comp \$ 100,000 Expiration Date Workers Comp Affidavit Date Signed: Performance & Guarantee \$ 10,000.00 Expiration Date Bond Expiration Date Expiration Date Please enclose a check in the appropriate amount payable to the Town Of Scituate along with this application Expiration New Application Fee: \$200.00 Renewal Application Fee: \$200.00 *NEW APPLICANTS MUST PROVIDE THREE WORK REFERENCES WITH THIS APPLICATION (SEE PART TWO FOR NEW APPLICANTS – PAGE Expiration Date Date Supervisor-Sewer Division	Fire Damage	\$ 100,000		Expiration Date	
Workers Comp Affidavit Date Signed: Performance & Guarantee \$ 10,000.00 Expiration Date Bond ****3 WRITTEN REFERENCES**** LICENSE FEE Please enclose a check in the appropriate amount payable to the Town Of Scituate along with this application New Application Fee: \$200.00 *NEW APPLICANTS MUST PROVIDE THREE WORK REFERENCES WITH THIS APPLICATION (SEE PART TWO FOR NEW APPLICANTS – PAGE RECOMMENDED APPROVALS Date	Auto Combined Single	\$ 500,000		Expiration Date	
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Bond ****3 WRITTEN REFERENCES**** LICENSE FEE Please enclose a check in the appropriate amount payable to the Town Of Scituate along with this applicatio New Application Fee: \$200.00 *NEW APPLICANTS MUST PROVIDE THREE WORK REFERENCES WITH THIS APPLICATION (SEE PART TWO FOR NEW APPLICANTS – PAGE RECOMMENDED APPROVALS Date Supervisor-Sewer Division	Workers Comp Affidavit			Date Signed:	
LICENSE FEE Please enclose a check in the appropriate amount payable to the Town Of Scituate along with this application Image: Supervisor Sever Division Image: Supervisor-Sever Division Image: Supervisor-Sever Division	Bond			Expiration Date	
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RECOMMENDED APPROVALS Date Supervisor-Sewer Division	New Application Fee: <u>\$20</u>	Renewal Application Fee: <u>\$200.00</u>			
Date Supervisor-Sewer Division	*NEW APPLICANTS MUST PROVIDE THREE WO	ORK REFERENCES WITH THIS API	PLICATION (SEE PA	RT TWO FOR NEW APPLICANTS - F	AGE ON
'		RECOMMENDED AI	PPROVALS		
Data Director DDW	Date		Supervisor-Sewer Division		
Date Director - DPW	Date		Director - DPW		
LICENSE ISSUED BY THE SELECT BOARD LICENSE #	LICENSE ISSUED BY THE SELECT	BOARD		LICENSE #	
CHAIRMAN DATE	CHAIRMAN		DATE		
RETURN APPLICATION AND APPROPRIATE FEES AND PAPERWORK TO: TOWN OF SCITUATE – SEWER DIVISI					

TOWN OF SCITUATE – SEWER DIVISION 161 DRIFTWAY SCITUATE, MA 02066