

TOWN OF PALMER, MASSACHUSETTS
FORM NO. 3
DRAINLAYER LICENSE APPLICATION

1) Statement of Drain Layer's Qualifications

This data must be included in and made part of the application. Failure to comply with this instruction is justification for rejecting the drain layer's application. Only experienced and competent persons may be licensed as drain layers per Appendix A Article A-II, Section 4.

Insurance certificate and Drain layers bond must be received **before** license approval.

A. Name of company and principal personnel: _____

_____ Telephone# _____.

B. Business address: _____

C. When organized and/or incorporated : _____

D. How many years have you been engaged in the contracting business under the current name: _____.

E. General character of work performed by your company: _____

_____.

F. Have you ever failed to complete any work awarded to you? _____

G. Have you ever defaulted on a contract? _____

H. List your major equipment: _____

I. List experience in the construction of work of similar magnitude. _____

_____.

J. Background and experience of the principal members of your personnel including the officers: _____.

2) Statement of understanding:

I _____ understand and have made myself aware of the requirements of

(Applicant)

the Town of Palmer's Regulation of Sewer Design, Construction and Use and guarantee that all statements made on this application are true and accurate to the best of my knowledge. Failure to comply with the said rules and regulations and the conditions of a particular permit may result in the revocation or suspension of this license.

Signature Date

Office Use Only

License Fee Paid: \$ _____

License Approved: _____

Bond Certificate provided: _____

Approved by: _____

Name

Date

Insurance certificate provided: _____