

LANCASTER SEWER DISTRICT COMMISSION

APPLICATION FOR UTILITY CONTRACTOR LICENSE

APPLICATION FEE : \$250.00

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Directions

Fill in all blanks, attach additional paperwork as necessary

Provide References on the attached reference form, fill out as directed

Enclose fee, PAYABLE TO LANCASTER SEWER DISTRICT with application to ensure processing

Return to: Lancaster Sewer District - PO Box 773 - 94 Main Street - South Lancaster MA, 01561

General

Name of Contractor: _____

Number of Employees: _____ Have been in business under present name for _____ years

Social Security Number or Federal Identification Number: _____

Company Address: _____

Mailing Address: _____
(if different)

Phone Number: _____ FAX Number: _____

Business Type

Licenses held

List all licenses held, license number, and expiration dates

License Held: _____ Number: _____ Expiration Date: _____

License Held: _____ Number: _____ Expiration Date: _____

License Held: _____ Number: _____ Expiration Date: _____

License Held: _____ Number: _____ Expiration Date: _____

If a corporation

Incorporated in what state: _____ Date of Incorporation: _____

If incorporated outside of Massachusetts please attach a CERTIFICATE OF GOOD STANDING WITH THE SEAL. This is required in accordance with MGL c. 30 § 39L and can be obtained by calling 617-727-9640 or 617-727-2850

President: _____ Treasurer: _____

Secretary: _____

If a partnership

List all Partners and Residences, (City and State) - use attachments if necessary

Name of Partner: _____ Residence: _____

Name of Partner: _____ Residence: _____

Name of Partner: _____ Residence: _____

If an individual doing business as

Name of firm: _____

Business address: _____

Name of individual: _____

Residence: _____

If a joint venture

List all companies

Name of Company: _____ Address: _____

Name of Company: _____ Address: _____

Name of Company: _____ Address: _____

Name of Company: _____ Address: _____

Additionally, a certified copy of Power of Attorney from each joint venture partner and the submission of a notarized letter signed by an officer of each company authorizing one individual to sign the license application on behalf of the Joint Venture is necessary.

Other type of business

Please state and provide any relevant documents as attachments

Type of Business: _____

Bonding

Surety Company which will furnish bonds: _____

Attach a letter from Surety Company stating the Contractor's Aggregate Bonding Capacity and Single Contract Limit . (Power-of-Attorney or Attorney-in-Fact must be attached to letter.) 720 CMR 5.02(8)

Largest Performance and Payment Bond amount ever furnished by the Contractor to an Awarding Authority or Owner: \$ _____

Project Issued For: _____

Location of Project: _____

Class of Work _____

Owner: _____

Owners Representative: _____ Phone Number: _____

Engineer/Architect: _____

A/E Representative: _____ Phone Number: _____

Has a claim against bonding ever been made for failure to complete any work awarded? YES. NO.

If YES, please provide the following information for each project you have failed to complete:

Surety Company which handled claim: _____

Project: _____

Location of Project: _____

Class of Work _____

Owner: _____

Owners Representative: _____ Phone Number: _____

Engineer/Architect: _____

A/E Representative: _____ Phone Number: _____

Has the Contractor been debarred from performing work of any kind by the Commonwealth of Massachusetts or any other state or any Federal Agency or Authority? YES. NO.

If YES, attach a copy of the debarment and a full explanation.

Terms & Conditions

To the Lancaster Sewer District Commission:

The undersigned, being the _____ of the company _____
(President, Owner's Agent, etc.) *(Company's name)*

In consideration of the granting of this permit the undersigned hereby agrees:

1. That the license is to remain in effect for a period of no more than one (1) year from date of issuance.
2. That this license is not a substitution for a sewer extension permit, connection permit, nor any other required
3. To follow all acceptable construction techniques as outlined in the Lancaster Sewer District's Rules and Regulations and as determined by the Commission's Inspecting Engineer . Variation from these rules is grounds for revoking the license at the discretion of the Commissioners.
4. To keep records on site indicating the materials used, installed, tested, and inspected for all constructed sewers and ancillary structures and to allow inspection of those records by the Superintendent of Sewers or any representative of the Commission at any time as may be necessary.
5. To post a performance bond and a certificate of insurance as determined by the Commission and specific to the project being done under this license.
6. To notify the Commission of any changes or additions to this application.

The undersigned accepts full liability for all work performed under this license and indemnifies the Lancaster Sewer District, the Town of Lancaster, and all respective agents and holds them harmless for all work performed under this license.

I hereby certify under the pains and penalties of perjury that the information as contained herein is true and correct:

Signature: _____ Date: _____

Printed name: _____

Attachments

Please include the listed attachments with your application

Reference sheets

Surety Letter

Other (if applicable):

Application approved and license granted:

Granted - Superintendent of Sewers: _____ Date: _____

REFERENCES

Provide at least three references of related work experience. This sheet may be duplicated and supplemented with additional references or letters if desired.

Project: _____

Contract Value: _____

Location of Project: _____

Description of Work _____

Owner: _____

Owners Representative: _____ **Phone Number:** _____

Engineer/Architect: _____

A/E Representative: _____ **Phone Number:** _____

Project: _____

Contract Value: _____

Location of Project: _____

Description of Work _____

Owner: _____

Owners Representative: _____ **Phone Number:** _____

Engineer/Architect: _____

A/E Representative: _____ **Phone Number:** _____

Project: _____

Contract Value: _____

Location of Project: _____

Description of Work _____

Owner: _____

Owners Representative: _____ **Phone Number:** _____

Engineer/Architect: _____

A/E Representative: _____ **Phone Number:** _____