



TOWN OF SALISBURY

Department of Public Works
39 Lafayette Road
Salisbury, Massachusetts 01952

NEW Drain Layer's License Application Instructions-

- Fill out a Drain Layer Application. Attach a copy of hoisting license to the application.
- Attach the \$100.00 application fee.
- Read and understand the Salisbury Rules and Regulations and the Town of Salisbury Sewer Construction Standards.
- Return the completed application and payment to the Public Works office. **This is to ensure that all financial obligations with the Town are up to date prior to submitting your application. Outstanding or past due financial obligations are grounds for immediate denial and/or immediate suspension.**
- The application will be reviewed and processed. Once a decision had been made, the licensee will be contacted via email.
- If approved, the licensee/company will need to file a License and Permit Bond in the amount of \$5,000.00 with the Town. The licensee shall also file a Certificate of Insurance. The Certificate of Insurance MUST contain:
 - Comprehensive General Liability coverage in the amounts of \$1,000,000/\$2,000,000.
 - Property Damage coverage including XCU coverage for explosion, collapse or underground damage in the amount of \$500,000.
 - Workman's Compensation coverage must also be filed.
 - The Town of Salisbury must be listed as additionally insured on the Certificate of Insurance.

All insurances & bonds must be filed and remain active throughout the period of the license. As certificate of insurances renew, copies must be sent to Public Works, to keep active status. No permits or inspections will be granted if there is not an active insurance policy, workman's compensation policy and security bond on file.

Companies or Drain Layers with outstanding debt to the Town will not be issued any permits until the debt has been resolved.



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NEW License Application for Individual Utility Connection Installers "Drain Layer"

Date: _____

Company Name: _____

Company Address: _____
Street Town/City State Zip Code

Business Telephone Number: _____ Email Address: _____

Licensee Name: _____
(Print) First Middle Last

Home Address: _____
Street Town/City State Zip Code

Licensee Cell: _____

Driver's License Number: _____ Class/State/Expiration: _____

Hoisting Engineering License Number: _____ Class/State/Expiration: _____

Construction Equipment Presently Owned by Applicant or Company: (Add additional sheet if necessary)

Year	Model
_____	_____
_____	_____
_____	_____
_____	_____

Are you currently employed by the Town of Salisbury? Y N (Please CIRCLE one)

Have you attached the \$100.00 Application fee? Y_ N (Please CIRCLE one)

Are all monetary obligations, if any, current with the Town of Salisbury? Y N (Please CIRCLE one)

Would you like to be listed on the Town of Salisbury's website as an approved Drain layer? Y N (Please CIRCLE one)

Attached are three municipal references on city/town letterhead and less than one year old.

I hereby certify that the above responses were given to the best of knowledge. I have read, understand and agree to abide by all the regulations set forth in Licensing of Drain Layers. The rules and regulations governing the use of sewers and the Town of Salisbury Sewer Construction standards and the Salisbury DPW Requirements for sewer service connections.

Applicant Signature: _____