



DEPARTMENT OF PUBLIC WORKS TOWN OF WAYLAND

*Entrusted To
Manage The
Public
Infrastructure*

Thomas M. Holder
Director

Joseph Doucette
Superintendent

Don Millette
Superintendent

Abby Charest
Town Engineer

DRAINLAYER LICENSE APPLICATION

NAME OF COMPANY: _____

OWNER / OPERATOR: _____

ADDRESS: _____

PHONE: _____

EMAIL: _____

Does hereby request a license to install water, wastewater and drain utilities in the Town of Wayland, Massachusetts.

NUMBER OF PEOPLE ON FULL-TIME EMPLOYMENT _____

HOISTING LICENSE INFO:

Operator: _____
(name) (hoisting license number) (expiration date)

EXPERIENCE:

REFERENCES: (Must attach 3 letters of reference from Water Departments)

1. _____ phone: _____
2. _____ phone: _____
3. _____ phone: _____

HIGHWAY - WATER - PARKS - CEMETERIES - TRANSFER STATION - ENGINEERING

In consideration of the granting of this license, the undersigned agrees:

1. I have received and reviewed a copy of the Wayland DPW Water Rules and Regulations. _____
(initial)
2. To accept and abide by all provisions of the Rules and Regulations of the Department of Public Works of the Town of Wayland, MA and all other pertinent rules and regulations, that may be adopted in the future. All material used in connection with this License will meet all Town of Wayland specifications.
3. To submit a copy of a Certificate of Insurance (\$500,000) in accordance with the provisions in the rules and regulations.
4. To post a Performance Bond (minimum \$10,000) in accordance with the provisions in the rules and regulations.
5. To notify the Department of Public Works of any changes or additions to this application and cooperate at all times with the Director and his representatives.
6. To be held liable for all work done for a period of one year from date of completion.
7. License shall expire at the end of each calendar year.
8. Have the INDEMNIFICATION form signed and notarized and submitted to the DPW.

Print: _____ (Applicant)

Signature: _____ (Applicant)

Application approved and LICENSE granted:

Number: _____

Date: _____

Signed: _____
DPW Director

HIGHWAY – WATER – PARKS – CEMETERIES – TRANSFER STATION – ENGINEERING

DPW FACILITY | 66 RIVER ROAD | WAYLAND, MASSACHUSETTS 01778 | TEL 508-358-3672

INDEMNIFICATION

The CONTRACTOR will indemnify and hold harmless the Town of Wayland, Massachusetts and its agents and employees from and against all claims, damages, losses and expenses, including attorney's fees, arising out of or resulting from the performance of the WORK which is described or otherwise addressed in the attaches permit provided that any such claims, damage, loss or expense is attributable to bodily injury, sickness, disease or death, or to injury to or destruction of tangible property; including the loss of use resulting therefrom; and is caused in whole or in part by any negligent or willful act or omission of the CONTRACTOR, and/or sub-CONTRACTOR, anyone directly or indirectly employed by any of them or anyone for whose acts any of them may be liable.

CONTRACTOR

The CONTRACTOR's signature is to be witnessed by a Notary Public who shall duly notarize this form.

DATE

By – Signature of Notary Public

Notary Public - Print

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