



*Town of Walpole
Commonwealth of Massachusetts*

Superintendent of Sewer and Water
Scott Gustafson

Town Hall
135 School Street
Walpole, Ma. 02081
Phone (508) 660-7307
Fax (508) 660-7323
waterdepartment@walpole-ma.gov

TO: ALL LICENSED DRAINLAYERS

FROM: Scott Gustafson

RE: Application Period for Calendar Year 2024

Date: December 5, 2023

It is necessary at this time for your company or firm to re-apply for a Drain Layer's License for **2024**.

The application can be mailed to the Water Department at any time with all of the appropriate fees (\$250 application fee), insurance papers and **Drain Layer's Bond**, so dated to expire on December 31, 2023. If you have a deposit passbook in lieu of an insurance bond, write a short note on your letterhead indicating that we are to hold it until December 31, 2024, if approved.

Any company wishing not to apply for a renewal of their license can pick up their documents from this year after January 2, 2024.

Enclosed are the forms for application and a copy of the rules for renewal. If any documents are missing when received, no re-issuance of a license will take place until complete.

Additionally, you will find attachments of certain regulations of the Board of Sewer & Water Commissioners. Please take your time to review them so as to prevent any problems or misunderstandings that may be associated with the work that you perform.

As you are aware, all work must be inspected by the Town Engineering Department prior to backfilling. Currently a 72-hour notice is required for inspections and/or mark outs. Please make sure that you schedule your work accordingly to avoid any delays. Utility locations and elevations that are provided by the Town of Walpole are based on the best available information that we have and may not be exact. The Town of Walpole assumes no responsibility for costs or any other issue that may be incurred or encountered as a result of incorrect locations due to errors associated with records.

Thank you and should you have any questions, please contact the Water Department at the above number.

Enclosures



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Water & Sewer Department

2024
APPLICATION FOR DRAINLAYER'S LICENSE
\$250 FEE

Date: _____

_____ hereby makes application for a license to engage in the business of
drain laying in Walpole, MA.

1. Business Address: _____
2. Residence Address: _____
3. Business Phone: _____ Cell Phone: _____
4. Present Occupation: _____ Years of Experience: _____
5. In what capacity: _____ No. of Employees: _____
6. List equipment available for doing this type of work: _____

7. If a plumber, MA License No: _____
8. If a Drain Layer, furnish references of previous employers: _____

9. Name of insurance company on bond and certification number: _____

For Office Use:

Date Received in Office: _____

Date Licensed: _____

Signature: _____

Affiliation: _____

By: _____