



CITY OF SOMERVILLE
 Commonwealth of Massachusetts
 93 Highland Avenue
 Somerville, MA 02143
 (617) 625-6600

2015 MAR 30 A 11: 36

Application to Renew Drain Layer License

R. M. PACELLA INC.
3 MADISON ST.
PLAINVILLE MA 02762

CITY CLERK'S OFFICE
 SOMERVILLE, MA
License #: BL15-000930
File #: 15-741
Fee: 250

Review and update the information below. If you have workers compensation insurance, attach proof showing the insurer and policy number. Then sign the Acknowledgment and return this form with your fee to the City Clerk's Office.

INFORMATION ON FILE:	CHANGES: (Note below or explain on a separate sheet)
Business/DBA Name: R. M. PACELLA INC. Business Location: 0 OUT OF AREA Business Phone: 508-695-5100	
License Holder: R. M. PACELLA INC. 3 MADISON ST. PLAINVILLE MA 02762	
Mailing Address: R. M. PACELLA INC. 3 MADISON ST. PLAINVILLE MA 02762	
Business Type: Corporation RICHARD PACELLA JR. RICHARD PACELLA JR. RICHARD PACELLA JR.	
FID: 042623036	
Emergency Contact: RICHARD PACELLA Phone: 508-962-0868	

Conditions: (to change any conditions, submit a new application. Contact the City Clerk's Office for more information)

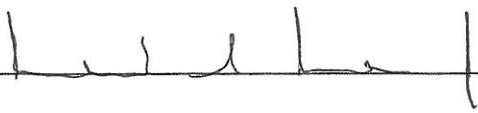
As you are aware, a drainlayer's license entitles an individual to make application for a permit to lay pipe and install appurtenances, with the proper approvals, in City Right-of-Ways, for the purpose of conveying sanitary waste water, surface and subsurface runoff, potable water, and to undertake other permitted and approved work within the limits of public ways and easements or which might have impact on systems that affect the public health & safety and the integrity of the City's Infrastructure.

The City of Somerville, through the DPW Engineering Department, is hereby issuing to each licensed drainlayer a new Permit Manual that explains and defines the City's standards for work in and around the City's Infrastructure. A digital copy of this manual can be found, and printed for your records, at <http://www.somervillema.gov/departments/dpw/engineering>. Each licensed Drainlayer shall be required to adhere to the rules and regulations set forth in this manual or risk losing his license as a Drainlayer in the City. **In addition, all utility work performed will require "as built" drawings (with ties) of the work, must be submitted to the Engineering Department within a week of its completion. No further permits will be issued until all "as-built" plans have been received and accepted by the Engineering Office.**

By accepting these conditions, you acknowledge receipt of this manual and agree to adhere to the rules and regulations set forth in this manual.

I hereby certify under the penalties of perjury that the following is true:

- All information shown above is true and accurate.
- Any changes above are subject to the approval of the BOARD OF ALDERMEN.
- I have filed all State tax returns and paid all State taxes required by law for this business.

Signature:  Date: March 17, 2015

Printed Name: Richard M. Pacella, Jr. Phone: 508-695-5100

CITY OF SOMERVILLE

SOMERVILLE • MASSACHUSETTS 02145

DPW - ENGINEERING DEPARTMENT

1 FRANEY ROAD ~ 1ST FLOOR

PHONE: 617-625-6600 • FAX: 617-625-4454

2015 MAR 30 A 11:36
CITY CLERK'S OFFICE
SOMERVILLE, MA

January 2015

Dear Licensed Drainlayers,

As you are aware, a drainlayer's license entitles an individual to make application for a permit to lay pipe and install appurtenances, with the proper approvals, in City Right-of-Ways, for the purpose of conveying sanitary waste water, surface and subsurface runoff, potable water, and to undertake other permitted and approved work within the limits of public ways and easements or which might have impact on systems that affect the public health & safety and the integrity of the City's Infrastructure.

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By signing below, you acknowledge receipt of this manual and agree to adhere to the rules and regulations set forth in this manual. Permits will not be issued until this letter has been signed and returned to the DPW – Engineering Department.

The Engineering Department welcomes the opportunity to work with you and your company in 2015. Please feel free to contact this office if there are any questions.

Signed,

Somerville DPW – Engineering Department

I hereby certify that I am familiar with the rules and regulations set forth in the City of Somerville Permit Manual and I further attest that I will work in conformance with said rules and regulations.

Name: Richard M. Pacella, Jr. Date: March 17, 2015

Signature:  Title: President

Company: R.M. Pacella, Inc.



BOND
(License or Permit - Continuous)

Bond No. 105889359

KNOW ALL MEN BY THESE PRESENTS:

THAT WE R.M. Pacella, Inc. as
Principal, and Travelers Casualty and Surety Company of America, a
corporation duly incorporated under the laws of the State of Connecticut and authorized to do
business in the State of MASSACHUSETTS, as Surety, are held and firmly bound unto
City of Somerville as Oblige, in
the penal sum of Ten Thousand (\$10,000.00) Dollars,
for the payment of which we hereby bind ourselves, our heirs, executors and administrators,
jointly and severally, firmly by these presents.

WHEREAS, the Principal has obtained or is about to obtain a license or permit for
Drainlayers Permit

NOW, THEREFORE, THE CONDITIONS OF THIS OBLIGATION ARE SUCH, that if the
Principal shall faithfully comply with all applicable laws, statutes, ordinances, rules or
regulations, pertaining to the license or permit issued, then this obligation shall be null and
void; otherwise to remain in full force and effect.

This bond shall become effective on March 20, 2015

PROVIDED, that regardless of the number of years this bond is in force, the Surety shall not
be liable hereunder for a larger amount, in the aggregate, than the penal sum listed above.

PROVIDED FURTHER, that the Surety may terminate its liability hereunder as to future acts
of the Principal at any time by giving thirty (30) days written notice of such termination to the
Oblige.

SIGNED, SEALED AND DATED this February 6, 2015

R.M. Pacella, Inc.

By: [Signature]
Richard M. Pacella, Jr. Principal
Travelers Casualty and Surety Company of America

By: [Signature]
Rebecca Shanley Attorney-in-fact



POWER OF ATTORNEY

Farmington Casualty Company
Fidelity and Guaranty Insurance Company
Fidelity and Guaranty Insurance Underwriters, Inc.
St. Paul Fire and Marine Insurance Company
St. Paul Guardian Insurance Company

St. Paul Mercury Insurance Company
Travelers Casualty and Surety Company
Travelers Casualty and Surety Company of America
United States Fidelity and Guaranty Company

Attorney-In Fact No. 223844

Certificate No. 005806833

KNOW ALL MEN BY THESE PRESENTS: That Farmington Casualty Company, St. Paul Fire and Marine Insurance Company, St. Paul Guardian Insurance Company, St. Paul Mercury Insurance Company, Travelers Casualty and Surety Company, Travelers Casualty and Surety Company of America, and United States Fidelity and Guaranty Company are corporations duly organized under the laws of the State of Connecticut, that Fidelity and Guaranty Insurance Company is a corporation duly organized under the laws of the State of Iowa, and that Fidelity and Guaranty Insurance Underwriters, Inc., is a corporation duly organized under the laws of the State of Wisconsin (herein collectively called the "Companies"), and that the Companies do hereby make, constitute and appoint

Adam W. DeSanctis, Gregory D. Juwa, Bryan F. Juwa, James J. Axon, Michael F. Carney, Wilder Parks Jr., Michael T. Gilbert, Christine B. Gallagher, David A. Boutiette, Paul A. Patalano, Richard F. Caruso, and Rebecca Shanley

of the City of Woburn, State of Massachusetts, their true and lawful Attorney(s)-in-Fact, each in their separate capacity if more than one is named above, to sign, execute, seal and acknowledge any and all bonds, recognizances, conditional undertakings and other writings obligatory in the nature thereof on behalf of the Companies in their business of guaranteeing the fidelity of persons, guaranteeing the performance of contracts and executing or guaranteeing bonds and undertakings required or permitted in any actions or proceedings allowed by law.

IN WITNESS WHEREOF, the Companies have caused this instrument to be signed and their corporate seals to be hereto affixed, this 19th day of February, 2014.

Farmington Casualty Company
Fidelity and Guaranty Insurance Company
Fidelity and Guaranty Insurance Underwriters, Inc.
St. Paul Fire and Marine Insurance Company
St. Paul Guardian Insurance Company

St. Paul Mercury Insurance Company
Travelers Casualty and Surety Company
Travelers Casualty and Surety Company of America
United States Fidelity and Guaranty Company



State of Connecticut
City of Hartford ss.

By: [Signature]
Robert L. Raney, Senior Vice President

On this the 19th day of February, 2014, before me personally appeared Robert L. Raney, who acknowledged himself to be the Senior Vice President of Farmington Casualty Company, Fidelity and Guaranty Insurance Company, Fidelity and Guaranty Insurance Underwriters, Inc., St. Paul Fire and Marine Insurance Company, St. Paul Guardian Insurance Company, St. Paul Mercury Insurance Company, Travelers Casualty and Surety Company, Travelers Casualty and Surety Company of America, and United States Fidelity and Guaranty Company, and that he, as such, being authorized so to do, executed the foregoing instrument for the purposes therein contained by signing on behalf of the corporations by himself as a duly authorized officer.

In Witness Whereof, I hereunto set my hand and official seal.
My Commission expires the 30th day of June, 2016.



[Signature]
Marie C. Tetreault, Notary Public

The Commonwealth of Massachusetts
Department of Industrial Accidents
Office of Investigations
600 Washington Street
Boston, Mass. 02111

Workers' Compensation Insurance Affidavit - General Businesses

Applicant information:

Name: R.M. Pacella, Inc.
Address: 3 Madison Street
City: Plainville State: MA Zip: 02762 Phone #: 508-695-5100

I am an employer with 5 employees (full and/or part time). Business Type: Retail
 I am a sole proprietor or partnership and have no employees. Restaurant/Bar/Eating Establishment
 We are a corporation that has exercised our right of exemption per c152 s1(4), and have no employees. Office and/or Sales (real estate, auto, etc.)
 We are a nonprofit organization staffed by volunteers and have no employees. Nonprofit
 Entertainment
 Manufacturing
 Health Care
 Other _____

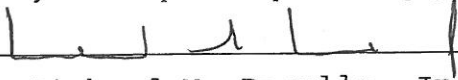
Workers' compensation insurance information (if applicable):

Insurance Company Name: Travelers Property Casualty Company of America
Address: P.O. Box 3555
City: Orlando State: FL Zip: 32802 Phone #: 781-817-8370
Policy #: UB-5051P385-15 Expiration Date: 2/22/2016

Applicant certification:

Failure to secure coverage as required under Section 25A of MGL 152 can lead to the imposition of criminal penalties of a fine up to \$1,500.00 and/or one years' imprisonment as well as civil penalties in the form of a STOP WORK ORDER and a fine of \$100.00 a day against me. I understand that a copy of this statement may be forwarded to the Office of Investigations of the DIA for coverage verification.

I do hereby certify under the pains and penalties of perjury that the information provided above is true and correct.

Signature:  Date: March 17, 2015
Print Name: Richard M. Pacella, Jr.

Official use only. Do not write in this area. To be completed by city or town official.

City or Town: _____ Permit/License #: _____
Contact Person: _____ Phone #: _____
 Board of Health
 Building Department
 City/Town Clerk
 Licensing Board
 Selectmen's Office
 Other _____