



## CITY OF SOMERVILLE

Commonwealth of Massachusetts

93 Highland Avenue

Somerville, MA 02143

(617) 625-6600

### Application to Renew Drain Layer License

**K.B. ARUDA CONSTRUCTION INC**  
**9 CLINTON PLACE**  
**EVERETT MA 02149**

**License #:** BL15-000660  
**File #:** 15-543  
**Fee:** 275

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)
<b>Business/DBA Name:</b> K.B. ARUDA CONSTRUCTION INC <b>Business Location:</b> 0 OUT OF AREA <b>Business Phone:</b> 617-650-8342	
<b>License Holder:</b> K.B. ARUDA CONSTRUCTION INC 9 CLINTON PLACE EVERETT MA 02149	
<b>Mailing Address:</b> K.B. ARUDA CONSTRUCTION INC 9 CLINTON PLACE EVERETT MA 02149	
<b>Business Type:</b> Corporation KEVIN ARUDA JR. KEVIN ARUDA JR. KEVIN ARUDA JR.	
<b>FID:</b> 421695329	
<b>Emergency Contact:</b> KEVIN ARUDA <b>Phone:</b> 617-650-8342	

**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.**

**From:** Kevin A <kbarudaconstruction@yahoo.com>  
**Sent:** Wednesday, April 20, 2016 4:38 PM  
**To:** John Long  
**Subject:** Fwd: Somerville bond

Sent from my iPhone

Begin forwarded message:

**From:** Susan Jones <[sjones@tonry.com](mailto:sjones@tonry.com)>  
**Date:** April 20, 2016 at 4:05:01 PM EDT  
**To:** Kevin Jr. <[kbarudaconstruction@yahoo.com](mailto:kbarudaconstruction@yahoo.com)>  
**Subject:** RE: Somerville bond

The Somerville Drainlayer Bond GC0436 for \$10,000 was renewed for the Term: January 13, 2016 to January 13, 2017. The surety company did not issue a continuation certificate because the original Somerville Bond form has language that is continuous until canceled. I.e. There is no end date on the bond.

We have been renewing this bond since we originally wrote the bond back in 2011. If the bond is non renewed or cancelled the surety company, Contractors Bonding and Insurance Company would issue a cancellation notice and mail the notice to the City of Somerville otherwise the bond stays active.

Please be advised this bond is in full force in effect.

Susan Jones | [sjones@tonry.com](mailto:sjones@tonry.com)  
Tonry Insurance Group, Inc. | Since 1926  
300 Congress Street | Quincy, MA 02169  
617 773-9200 | 617 773-9920 fax | [www.tonry.com](http://www.tonry.com)

---

**From:** Kevin Jr. [<mailto:kbarudaconstruction@yahoo.com>]  
**Sent:** Wednesday, April 20, 2016 3:57 PM  
**To:** Susan Jones  
**Subject:** Somerville bond

Susan - John long wrote back and indicating that he needs the cert for the 10,000 drain layer bond. the one we sent was for 5,000 street bond

**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: K. B. ARUDA

Address: Box 340822

City: CAMBRIDGE State: MA Zip: 02139 Phone #: (617) 650-8342

- ☒ I am an employer with 2 employees (full and/or part time). Business Type: ☐ Retail  
☐ Restaurant/Bar/Eating Establishment  
☐ Office and/or Sales (real estate, auto, etc.)  
☐ Nonprofit  
☐ Entertainment  
☐ Manufacturing  
☐ Health Care  
☒ Other GENERAL UTILITY CONST.
- ☐ I am a sole proprietor or partnership and have no employees.
- ☐ We are a corporation that has exercised our right of exemption per c152 s1(4), and have no employees.
- ☐ We are a nonprofit organization staffed by volunteers and have no employees.

**Workers' compensation insurance information (if applicable):**

Insurance Company Name: TONEY NORTHWEST.

Address: \_\_\_\_\_

City: LEXINGTON State: MA Zip: \_\_\_\_\_ Phone #: (781) 861-1800

Policy #: 0891384055 Expiration Date: 3/24/17

**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: [Signature] Date: 4/20/16

Print Name: KEVIN A. ARUDA 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 \_\_\_\_\_