

CITY OF SOMERVILLE BOARD OF ALDERMEN

93 HIGHLAND AVENUE SOMERVILLE, MA 02143 (617) 625-6600

APPLICATION TO RENEW DRAIN LAYER LICENSE

License #:

930

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

Fee:

250.00

Account ID:

741

Reference #:

930

Review and update the information below. <u>If you have workers compensation insurance</u>, 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: OUT OF AREA Business Phone: 508-695-5100				
License Holder: R. M. PACELLA INC. 3 MADISON ST. PLAINVILLE, MA 02762 508-695-5100	CHY CHESOME			
Mailing Address. R. M. PACELLA INC. 3 MADISON ST. PLAINVILLE, MA 02762	Y CLERK'S OF SOMERVILLE.			
Business Type: CORPORATION (INC. LLC) PRESIDENT - RICHARD PACELLA JR. SECRETARY - RICHARD PACELLA JR. TREASURER - RICHARD PACELLA JR.	FFICE 4			
FID: 042623036				
Food Manager/Emergency Contact: RICHARD PACELLA 508-962-0868				

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

Hours: NOT APPLICABLE

Description of Location and/or Other Conditions:

I hereby certify under the penalties of perjury that the following is true -All information shown above is true and accurateAny changes above are subject to the approval of the BOARD OF Al -I have filed all State tax returns and paid all State taxes required by I	
Signature:	Date February 28, 2014
Print Name: Richard M. Pacella, Jr.	Phone 508.695.5100



BOND (License or Permit - Continuous)
Bond No. <u>105889359</u>
KNOW ALL MEN BY THESE PRESENTS:
THAT WE R.M. Pacella, Inc. Principal, and Travelers Casualty and Surety Company of America 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 Obligee, in
the penal sum of <u>Ten Thousand</u> (<u>\$10,000.00</u>) 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 fo
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 onMarch 20, 2014
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 Obligee.
SIGNED, SEALED AND DATED this February 12, 2014
R.M. Pacella, Inc.
By: Richard M. Pacella, Jr. Principal
Travelers Casualty and Surety Company of America
G-2151A (6/10) By: Rebecca Shanley Attorney-in-fact
Autoriey-in-lact



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.

005522884

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

of the City of			, State of	Massach	usetts	 ,	their true and law	ful Attorney(s)-in-Fac
other writings ob	ligatory in the	nature thereof on bel	ned above, to sign, execu half of the Companies in idertakings required or pe	their business of	guaranteein	g the fidelity of p	ersons, guarantee	
IN WITNESS W	HEREOF, the	Companies have cau	used this instrument to be	signed and their	corporate se	als to be hereto af	fixed, this	7th
		Fidelity and Gua St. Paul Fire and	nalty Company ranty Insurance Compa ranty Insurance Underv Marine Insurance Com n Insurance Company	vriters, Inc.	Tra Tra	velers Casualty a velers Casualty a	surance Company nd Surety Company nd Surety Company y and Guaranty (any any of America
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State of Connection City of Hartford s				Ву:		Robert L. Rane	y, Senior Vice Presid	dent
Fire and Marine I Casualty and Sure	President of Fa nsurance Compa ety Company of	any, St. Paul Guardia America, and Unite	Company, Fidelity and Gu an Insurance Company, Si d States Fidelity and Gua ng on behalf of the corpo	aranty Insurance . Paul Mercury In ranty Company, a	Company, For the consurance Consurance Consurance Consurance Consum Consultation (Consum Consultation)	idelity and Guarai mpany, Travelers as such, being aut	nty Insurance Unde Casualty and Sure	ty Company, Travelers



58440-8-12 Printed in U.S.A.

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

Workers' Compensation Insurance Affidavit - General Business

Applicant information:
Name: R.M. Pacella, Inc.
Address: 3 Madison Street
<u>City:</u> Plainville State: MA Zip: 02762 Phone #: 508-695-5100
I am an employer with 12 employees Business Type: (full and/or part time). 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. Restail Restaurant/Bar/Eating Establishment Office and/or Sales (real estate, auto, etc.) Nonprofit Entertainment Manufacturing Health Care Other_Construction
Workers' compensation insurance information (if applicable):
Insurance Company Name: DeSanctis Insurance Agency, Inc.
Address: 100 Unicorn Park Drive
City: Woburn State: MA Zip: 01801 Phone #: 781-935-8480
Policy #: 7PJUB5051P385 Expiration Date: 2/22/2015
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 upon 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 DLA for coverage verification.
I do hereby certify under the pains and penalties of perjury that the information provided above is true and correct.
Signature:
Print Name: Richard M. Pacella, Jr./President
Official use only. Do not write in this area. To be completed by city or town official. City or Town: Board of Health Board of Health
Building Department City/Town Clerk Licensing Board Selectmen's Office Other

(revised Jan. 2008)