



CITY OF SOMERVILLE

Commonwealth of Massachusetts

93 Highland Avenue

Somerville, MA 02143

(617) 625-6600

2016 FEB 24 A 11: 52

Application to Renew Drain Layer License

CITY CLERK'S OFFICE
SOMERVILLE, MA

LEDERMAN ENGINEERING INC.
29 FREMONT AVE
CHELSEA MA 02150

License #: BL15-001106
File #: 15-872
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)
Business/DBA Name: LEDERMAN ENGINEERING INC. Business Location: 0 OUT OF AREA Business Phone: 617-889-2079	
License Holder: LEDERMAN ENGINEERING INC. 29 FREMONT AVE CHELSEA MA 02150	
Mailing Address: LEDERMAN ENGINEERING INC. 29 FREMONT AVE CHELSEA MA 02150	
Business Type: Corporation RICHARD LEDERMAN MARC LEDERMAN SARRA LEDERMAN	
FID: 270387672	
Emergency Contact: SARRA LEDERMAN Phone: 617-293-4689	

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.**

BOND DEPARTMENT

AGENCY: 38-0010 Starkweather Shepley Insurance

CONTINUATION CERTIFICATE	BOND S-828390
--------------------------	---------------

Principal:

Lederman Engineering, Inc.
29 Fremont Ave
Chelsea, MA 02150

Obligee:

City of Somerville
Dept of Public Works
1 Franey Rd
Somerville MA 02145

Bond Term in Months: 12**Effective Date:** 6/11/2015**Expiration Date:** 6/11/2016**Penalty Amount:** \$10,000**Type of Bond:** License**Classification:** Drainlayer Automatic Renewals**Remarks:**

Drainlayer License

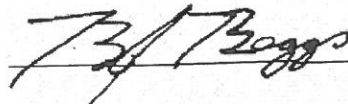
It is hereby agreed that the captioned numbered Bond is continued in force in the above amount for the period of the continued term stated above and is subject to all the covenants and conditions of said Bond.

This continuation shall be deemed a part of the original Bond, and not a new obligation, no matter how long the Bond has been in force or how many premiums are paid for the Bond, unless otherwise provided for by statute or ordinance applicable.

In witness whereof, the company has caused this instrument to be duly signed, sealed and dated as of the above "continuation effective date".

NGM INSURANCE COMPANY

By:



Attorney-in-fact



This Continuation Certificate needs to be filed with the obligee. No other proof of renewal has been sent to any other party.

Agency Bill

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: Lederman Engineering Inc.
(Marc Lederman) Lederman Engineering Inc.
Address: 29 Fremont Ave.
City: Chelsea State: MA Zip: 02150 Phone #: 617-293-4689

- ☒ I am an employer with 3 employees
(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.

Business Type:

- ☐ Retail
☐ Restaurant/Bar/Eating Establishment
☐ Office and/or Sales (real estate, auto, etc.)
☐ Nonprofit
☐ Entertainment
☐ Manufacturing
☐ Health Care
☐ Other _____

Workers' compensation insurance information (if applicable):

Insurance Company Name: Liberty Mutual Insurance
Address: 175 Berkeley St.
City: Boston State: MA Zip: 02116 Phone #: 800 653 7893
Policy #: WC5 31S-383-422-015 Expiration Date: 11/23/2016

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: Marc Lederman Date: 2/22/2016

Print Name: Marc Lederman

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 _____