

APPLICATION FOR SEWER BUILDER'S LICENSE

Applicant

Date _____ I, _____ hereby petition the City of Sidney for the issuance of a sewer builder's license for the year 20_____.

Name of Firm _____

Contact Email Address: _____

Business Address _____

City _____ State _____ Zip _____

Business Phone Number (_____) _____ Fax Number (_____) _____

Number of years in sewer construction business _____ Name of person(s) who will be performing sewer building work for your firm _____

Insurance Surety

Name of Insurance Company _____

Name of Insurance Agency _____

Contact Name & Email Address: _____ / _____

Address of Agent _____

City _____ State _____ Zip _____

Business Phone Number (_____) _____ Fax Number (_____) _____

I have reviewed Sewer Regulations Chapters 913 & 914 (included) and am knowledgeable of specifications & requirements for City of Sidney sanitary sewer laterals installation (_____) **check & initial**

I agree if licensed, to follow and to be governed by the rules and regulations set forth by the City for installation of sanitary sewer laterals.

Signature of Applicant _____

Resident Sureties

The undersigned represent that they are personally acquainted with the applicant and will vouch for the business capacity and reputation of the applicant and believe that he is a master of his trade and would be willing to be governed in all respects by the appropriate ordinances, rules and regulations of the City.

1. Name & Address _____
Association with applicant _____

2. Name & Address _____
Association with applicant _____

<u>To be completed by City</u>		Bond Number _____
Surety bond provided	YES ()	NO ()
Two resident sureties provided	YES ()	NO ()
Resident sureties checked	YES ()	NO ()
Resident sureties acceptable	YES ()	NO ()
License approved	YES ()	NO ()
If "NO" state reason _____		
City Manager _____		