

TOWN OF SWAMPSCOTT DRAIN LAYER APPLICATION

Contact Name:	
Company Name:	
Address:	
Phone Number:	
Email Address:	

Requirements:

- 3 References 1 must be from a municipality
- \$5000 Street Opening bond
- Certificate of Liability naming Town of Swampscott as additional insurer
- \$50 Year for Annual License Renewable on Jan 1
- \$100 per Street Opening