

**CITY OF SHOREVIEW
UTILITY DEPARTMENT INSPECTIONS
PIPE LAYER LICENSE VERIFICATION**

COMPANY NAME _____
BUSINESS ADDRESS _____ _____
TELEPHONE _____
PIPELAYER TYPE <u>ABC</u> <u>MUCA</u> <u>LET</u> <u>OSTP</u> LICENSE _____ <i>(circle one)</i>

PROVIDE THE FOLLOWING:

- COPY OF PIPE LAYER’S CARD (BOTH SIDES)
- COPY OF \$25,000 STATE BOND
- COPY OF INSURANCE - \$100,000/\$300,000 – CITY OF SHOREVIEW LISTED AS THE CERTIFICATE HOLDER

**LIST ALL COMPANIES/PERSONS AUTHORIZED TO APPLY
FOR PERMITS UNDER THE CERTIFICATION:**

(TYPE OR PRINT NAME)	SEWER/WATER
_____	_____
_____	_____
_____	_____

**ONLY THE ABOVE NAMED PERSONS ARE AUTHORIZED TO
APPLY FOR PERMITS UNDER MY CERTIFICATION**

DATE: _____

PIPELAYER’S SIGNATURE _____

PIPELAYER’S CERTIFICATION # _____