City of Meriden, Engineering Division
142 East Main Street, Room 19, Meriden, CT 06450
Tel: (203) 630-4018
Fax: (203) 630-4025

2013 Meriden Drain Layers Bond

Bond Number: _____

Effective Date can not be prior to January 1, 2013

KNOW ALL MEN BY THESE PRESENTS:

THAT:
(PRINCIPAL)_____
Drain layer's name EXACTLY as it appears on CT State Plumbing License

CT Plumbing license # ____ ____ ____ ____ ____ ____ License Class _____
Fill in SIX digits only 1 2 3 4 5 6 P-1, P-7 or W-9 only)

DBA: _____

Address:_____

City, State, Zip:_____

Telephone- Office_____Cell_____
As principal, and (Surety's Name):
SURETY_____

As surety, are held and firmly bound unto the Treasurer of the City of Meriden for the sum of
FIVE THOUSAND DOLLARS, ($5,000.00)
to which payment, well and truly made we, the principal and the surety bind ourselves, our heirs, executors, successors and assigns each of them firmly by these presents.
AS DRAIN LAYER TO MAKE PRIVATE CONNECTIONS WITH PUBLIC SEWERS

Now and therefore, if the drain layer shall perform the work for which this Bond is granted and complies with all the CT State statutes and regulations as well as the City of Meriden Ordinances and the Meriden PUC rules and regulations, which are now or may hereinafter be in force; and shall hold the City of Meriden and its agents, servants and employees harmless in every respect from all losses, costs, liabilities, expenses, and lawsuits whatsoever caused in whole or in part by work done under this bond license, then this bond shall be void; otherwise to be and remain in full force and effect.

All storm sewer and sanitary sewer pipe construction and or capping outside of the building will require this bond to be posted with the City.

You must attach a *signed* copy of the drain layers current State of Connecticut Plumbing License on page 2 in space provided for this bond to be valid. Do not send in without this information or bond will be **rejected** and returned.

TYPE OR USE BLOCK LETTERS TO FILL IN ALL SPACES

2013 Meriden Drain Layers Bond

Bond Number: _____

Drain Layer's Name:

_____

First Middle Last

Signed and sealed at _____, CT on this _____of _____, 20_____
(Name of town) (Day) (Month)

Signed in blue ink in the presence of two (2) Witnesses:

By: _____
Print Name:

By: _____
Print Name:

Principal: (Drain Layer Only must sign in blue ink)

By: _____
Print Name:

Signatures in blue ink required on **By** line.
Bond will be rejected if name is printed.
(Please print name below signature line.)

ORIGINAL RAISED SEAL/FOIL SEAL REQUIRED

Surety:

By_____
Printed Name:

Tape a copy of current s*igned*

Connecticut State Plumbing License Here
Bond not accepted unless attached.

Agent's Name_____
Address:_____
City, State, Zip_____
Telephone #_____
Fax #:_____
Email:_____

This Drain layer's Bond is valid the date received and approved by Engineering, but not before January 1, 2013, and expires December 31, 2013, regardless of the date that it was taken out. There will be no release of bond issued. Continuation Certificate is not acceptable, as a current Drain Layer's Bond Form with *new* bond number is required for each calendar year. Engineering's current Bond Forms are available online at www.meridenct.gov. Follow the links to Department> Engineering-> File Repository.

Approved by Engineering on _____by _____
Month Day Year Authorized Signature