



Engineering Division

TOWN OF ARLINGTON
Department of Public Works
51 Grove Street
Arlington, Massachusetts 02476
Office (781) 316-3320 Fax (781) 316-3281

MEMORANDUM

To: Select Board
From: Engineering Division
Re: Approved Contractor License
Date: February 28, 2020

Dear Board Members,

Reference is hereby made to an application by Joe Borselli of Borselli, Inc., to be accepted as an Approved Contractor in the Town of Arlington.

Contact information is as follows:

Borselli, Inc.
110 Winn Street
Woburn, MA 01801
Joe Borselli
Phone: 781-935-5030
Email: BorselliExcavating@gmail.com

Upon review of the provided references supplied by the contractor, we recommend approval and issuance of an Approved Contractor and Drainlayer license.

Regards,

William C. Copithorne, P.E.
Assistant Town Engineer

cc: Wayne Chouinard, Town Engineer
File



TOWN OF ARLINGTON DEPARTMENT OF PUBLIC WORKS

APPLICATION FOR TOWN OF ARLINGTON DPW CONTRACTOR LICENSE

Directions: Please complete ALL fields below and deliver the completed application to the Department of Public Works Engineering Department at 51 Grove Street for Processing and Submission to the Board of Selectmen. Please also include in your submission a \$75.00 application fee in the form of a check payable to the "Town of Arlington". Any questions regarding this application form or procedure should be directed to the Town of Arlington Engineering Department at 781-316-3386.

Scope of Work

Please indicate the scope of work you intend to perform as a DPW Approved Contractor in the Town of Arlington (check all that apply):

- Water
 Sanitary Sewer
 Stormwater Drainage
 Sewer/Drain Inspection
 Driveway Work
 Curb/Sidewalk Work

Applicant Information

Applicant/Firm Name: Borselli Inc.
Select One: Corporation Partnership Proprietorship Other: _____
Street Address: 110 Winn Street **City/Town:** Woburn **State:** MA
Primary Phone: (781) 935-5030 **E-mail:** BORSELLI EXCAVATING @ GMAIL
Length of Time in Business under the same Firm Name: 60 years
Full Name(s) of Principal(s): BORSELLI Incorporated
Primary Contact Person: SOE BORSELLI Cell # (781) 760-0859

Experience/Previous Work

Nature of Typical/Standard Work: Installation of water service/main lines, drainage & Septic Sewer Service
Have you ever performed this type of work in Arlington: Yes No
If Yes, Please provide Location: _____ **Approximate Date:** _____
Total Amount of such construction this year: multiple Disconnections of water & Sewer lines + installation in Boston Woburn Melrose Welfleet
Total Amount of such construction last year: Stormwater Underdrains etc over 2 dozen different Subsites this & last year
Total Amount of such construction next previous year: 6 more installations of drainage water & sewer this spring

Municipal References - Please Attach Written Reference Letters

Municipality: City of Woburn phone # 781 897-5980
Primary Contact Name: Sgt Duran DPW Supervisor **Email:** _____
Municipality: Town of Burlington phone # (781) 270 1640
Primary Contact Name: Lisa Matarrese Engineering Dept **Email:** _____
Municipality: Town of Winchester DPW Supervisor
Primary Contact Name: PAUL GANGI DPW **Email:** phone (781) 721-7109

Banking/Financial References - Please Attach Written Reference Letters if Available

Bank Reference: Northern Bank & Trust **Phone:** (781) 937-5400

Federal Tax ID or Social Security #: _____
Note to Town Staff: Redact Social Security # before releasing document

Your social security number or federal identification number will be furnished to the Massachusetts Department of Revenue to determine whether you have met tax filing or tax payment obligations. Licenses who fail to correct their non-filing or delinquency will be subject to license suspension or revocation. This request is made under the authority of Massachusetts General Law, Chapter 62C, Section 49A.

Signature/Endorsement

By signing below, I certify that under the penalties of perjury that to the best of my knowledge and belief all information on this application is true and correct. I also certify by signature below that I/we have filed all state tax returns and paid all state taxes as required by law. I also hereby agree to conform in all respects to the conditions governing such license as printed in the By-Laws of the Town, and such other rules and regulations as the Selectmen and/or Department of Public Works may establish.

Applicant Signature: _____ **Date:** 1/20/20

OFFICE OF THE SELECT BOARD

DIANE M. MAHON, CHAIR
DANIEL J. DUNN, VICE CHAIR
JOSEPH A. CURRO, JR.
JOHN V. HURD
STEPHEN W. DECOURCEY



730 MASSACHUSETTS AVENUE
TELEPHONE
781-316-3020
781-316-3029 FAX

TOWN OF ARLINGTON
MASSACHUSETTS 02476-4908

March 2, 2020

Joe Borselli
Borselli, Inc.
110 Winn Street
Woburn, MA 01801

Dear Mr. Borselli:

The Select Board will be discussing your request for a License to do Drainlaying in the Town of Arlington on Monday, March 9th in the Select Board Chambers, Town Hall, 2nd Floor. The meeting begins at 7:15 p.m. Although it is not a requirement that you attend the meeting, you are invited to be in attendance.

Very truly yours,
SELECT BOARD

A handwritten signature in cursive script that reads "Marie A. Krepelka".

Marie A. Krepelka
Board Administrator

MAK:lc