



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: June 10, 2020

Dear Board Members,

Reference is hereby made to an application by John Durant of Milestone Excavating & Landscaping, LLC to be accepted as an Approved Contractor in the Town of Arlington.

Contact information is as follows:

Milestone Excavating & Landscaping, LLC
104 Lancaster Road Unit #3
Shirley, MA 01464
John Durant
Phone: 978-425-2700
Email: john@milestonelandscaping.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: MILESTONE EXCAVATING & LANDSCAPING, LLC
Select One: ☐ Corporation ☐ Partnership ☒ Proprietorship ☐ Other: _____
Street Address: 104 LANCASTER ROAD UNIT #3 City/Town: SHERLEY State: MA 01464
Primary Phone: (978) 425-2700 E-mail: INFO@MILESTONELANDSCAPING.COM
Length of Time in Business under the same Firm Name: 1989 - 2020 31 YEARS
Full Name(s) of Principal(s): MARK S. METRANO
Primary Contact Person: JOHN P. DURANT CELL # 978-227-2578 JOHN@MILESTONELANDSCAPING.COM

Experience/Previous Work

Nature of Typical/Standard Work: CIVIL SITE WORK, WATER, SEWER, DRAINAGE EARTHWORK
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: 1,400,000⁰⁰
Total Amount of such construction last year: 1,800,000⁰⁰
Total Amount of such construction next previous year: 1,750,000⁰⁰

Municipal References - Please Attach Written Reference Letters

Municipality: CONCORD WATER & SEWER DEPARTMENT
Primary Contact Name: TONY J. MANCUSO (978) 318-3250 Email: MANCUSO@CONCORDMA.GOV
Municipality: ACTON WATER DISTRICT
Primary Contact Name: STEPHEN PETERSON (978) 263-9107 Email: STEPHEN@ACTONWATER.COM
Municipality: CITY OF MARLBOROUGH
Primary Contact Name: BERRY DUELLETTE (508) 344-9460 Email: BDUELLETTE@MARLBOROUGH-MA.GOV

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

Bank Reference: MADON STREET BANK CARL WIZLEY (978) 487-1473 Phone: (978) 732-1080
Federal Tax ID or Social Security #: MA: WIT FEDERAL ID

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:

John P. Durant P.M. 05/19/2020

Date:

05/19/2020

Reset Form

Print Form