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

MEMORANDUM

To: Board of Selectmen
From: Engineering Division
Re: Approved Contractor License
Date: June 10, 2020

Dear Board Members,

Reference is hereby made to an application by Kevin Aruda Jr. of K. B. Aruda Construction Inc. to be accepted as an Approved Contractor in the Town of Arlington.

Contact information is as follows:

> K. B. Aruda Construction Inc.
> P. O. Box 390822
> Cambridge, MA 02139
> Kevin Aruda Jr.
> Phone: 617-492-0202
> Email: kbarudaconstruction@yahoo.com

As a previously approved contractor in good standing, we recommend approval and issuance of an Approved Contractor and Drainlayer license.

Regards,

William C. Copithorne
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: K.B. ARUDA CONSTRUCTION INC.

Select One: ☒ Corporation ☐ Partnership ☐ Proprietorship ☐ Other: _____

Street Address: BOX 390822 **City/Town:** CAMBRIDGE **State:** MA

Primary Phone: 6174920202 **E-mail:** kbarudaconstruction@yahoo.com

Length of Time in Business under the same Firm Name: 14 years

Full Name(s) of Principal(s): Kevin Aruda Jr.

Primary Contact Person: Kevin Aruda Jr.

Experience/Previous Work

Nature of Typical/Standard Work: Underground Utility

Have you ever performed this type of work in Arlington: ☒ Yes ☐ No

If Yes, Please provide Location: Various **Approximate Date:** Various

Total Amount of such construction this year: 800k +/-

Total Amount of such construction last year: 800k

Total Amount of such construction next previous year: 800k-900k

Municipal References - Please Attach Written Reference Letters

Municipality: ON FILE

Primary Contact Name: _____ **Email:** _____

Municipality: _____

Primary Contact Name: _____ **Email:** _____

Municipality: _____

Primary Contact Name: _____ **Email:** _____

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

Bank Reference: ON FILE **Phone:** _____

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:** 6/3/2020

[Reset Form]
[Print Form]