



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: July 28, 2022

Dear Board Members,

Reference is hereby made to an application by Albert Greenhut of Craig's Landscaping Inc. to be accepted as an Approved Contractor in the Town of Arlington.

Contact information is as follows:

Craig's Landscaping Inc.
70 Bow Street
Arlington MA, 02474
Albert Greenhut
Phone: 781-643-3841
Email: albert@craigslandscapinginc.com

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

Regards,

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

cc: Wayne Chouinard PE,
Town Engineer



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: Craigs Landscaping Inc
 Select One:
 Corporation
 Partnership
 Proprietorship
 Other: _____
 Street Address: 70 Bow St. City/Town: Arlington State: MA
 Primary Phone: 781 643 3841 E-mail: albert@craigslandscapinginc.com
 Length of Time in Business under the same Firm Name: 35 years
 Full Name(s) of Principal(s): Albert Greenhut
 Primary Contact Person: Albert Greenhut

Experience/Previous Work

Nature of Typical/Standard Work: All aspects of landscaping masonry and asphalt
 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: _____
 Total Amount of such construction last year: _____
 Total Amount of such construction next previous year: _____

Municipal References - Please Attach Written Reference Letters

Municipality: _____ Email: _____
 Primary Contact Name: _____
 Municipality: _____ Email: _____
 Primary Contact Name: _____
 Municipality: _____ Email: _____
 Primary Contact Name: _____

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

Bank Reference: Leader Bank Arlington MA. Tho Jason Sauti Phone: 781 641 8800
 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: Albert Greenhut Date: 7/26/22

OFFICE OF THE SELECT BOARD

LENARD T. DIGGINS, CHAIR
DIANE M. MAHON, VICE CHAIR
JOHN V. HURD
STEPHEN W. DECOURCEY
ERIC D. HELMUTH



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

TOWN OF ARLINGTON
MASSACHUSETTS 02476-4908

August 16, 2022

Albert Greenhut
Craig's Landscaping Inc.
70 Bow Street
Arlington, MA 02474
albert@craigslandscapinginc.com

Dear Mr. Greenhut:

The Select Board will be discussing your request for a License to do Drainlaying in the Town of Arlington by remote participation on Monday, August 22, 2022 at 7:15 p.m. Although it is not a requirement that you join this virtual meeting, you are invited to do so.

Information which includes a link to the meeting will be available at the bottom of the Select Board Agenda as well as on the Town Calendar when the meeting is posted Thursday, August 18th by 7:00 p.m.

Please contact this office by email, lcosta@town.arlington.ma.us, if you have any questions.

Very truly yours,
SELECT BOARD

A handwritten signature in cursive script that reads "Lauren Costa".

Lauren Costa
Administrative Assistant