

**CITY OF DEEPHAVEN  
20225 COTTAGEWOOD ROAD  
DEEPHAVEN MN 55331  
(952) 474-4755**

**2010 APPLICATION FOR SEWER CONTRACTORS LICENSE**

I/We the undersigned hereby make application for a Sewer Contractors License for a period of one year ending December 31, 2010.

**REQUIREMENTS:**

1. Application [Below]
2. Certification of Compliance Minnesota Worker's Compensation Law [Form Enclosed]
3. Insurance: Certificate must name the City as insured.  
\$ 50,000.00 Per Person  
\$100,000.00 Per Occurrence  
\$ 10,000.00 Property Damage
4. Bond: \$2,000.00 bond or a copy of State Bond
5. Fee: \$20.00

Company Name \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_

State \_\_\_\_\_ Zip \_\_\_\_\_ Phone Number \_\_\_\_\_

Minnesota Tax Identification Number \_\_\_\_\_

If a Minnesota Tax Identification Number is not required for the business being operated, indicate that by placing

An X in the box.

Applicant's Signature \_\_\_\_\_

Title \_\_\_\_\_

*OFFICE USE ONLY*

Receipt Number \_\_\_\_\_

License No. \_\_\_\_\_