



**City of Burton**  
**4303 S. Center Rd.**  
**Burton, MI 48519**  
**www.burtonmi.gov**

**Application for Sewer & Water Installer License**

**Date:** \_\_\_\_\_ **License Expiration:** \_\_\_\_\_

**Name of Applicant:** \_\_\_\_\_

**Applicant Address:** \_\_\_\_\_, \_\_\_\_\_

**Phone Number:** (\_\_\_\_) \_\_\_\_\_ **Email:** \_\_\_\_\_

**Name of Business:** \_\_\_\_\_

**Business Address:** \_\_\_\_\_, \_\_\_\_\_

**Phone Number:** (\_\_\_\_) \_\_\_\_\_ **Plumbing License #:** \_\_\_\_\_

LICENSE FEES	Amount	Proration	PAID
1. Sewer Installer Expires - March 31, _____	\$100.00		<input type="checkbox"/>
2. Water Installer Expires - March 31, _____	\$100.00		<input type="checkbox"/>

- Applicant must file a Performance Bond in the Amount of \$10,000.
- Applicant must maintain insurance against liability in the amounts of \$100,000 for injury to one person and \$300,000 per occurrence, and against liability for property damage in the amount of \$100,000.
- Each contractor shall maintain Workman's Compensation insurance covering all employees.

The undersigned hereby specifically agrees that any approval granted for license received after said approval is subject to revocation at any time by the Burton City Council, and that there shall be no liability on the part of the Burton City Council of the City of Burton, or any officers, members or employees of said units, because of any revocations and the granting of such approval of license does not create a vested right.

The undersigned hereby specifically agrees to abide by all provisions of Burton City Ordinance #112, adopted 8-4-69, effective 9-15-69, and all City Ordinances and Resolutions of the Burton City Council now in force or hereinafter adopted.

I, \_\_\_\_\_ (applicant) being duly sworn, state that I have read the foregoing application and exhibits therein contained and attached, by me subscribe and knowingly made the foregoing answers, statements, and representations therein contained and that said statement representations are true.

**THIS APPLICATION MUST BE SIGNED BEFORE A NOTARY:** \_\_\_\_\_  
 Signature of Applicant

Subscribed and sworn before me a Notary Public in and for the County of \_\_\_\_\_, State of Michigan this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_.



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**Notary Public**

**Commission Expires**