

CITY OF HAVERHILL

DATE 12-5-11

Honorable President and Members of the Municipal Council:

The undersigned respectfully asks that he may receive a license for

DRAINLAYER

Drainlayer's Name James Boraczek Signature [Signature]  
PRINTED

Home Address:

Street 7 Chisholm RD PO box \_\_\_\_\_

City/Town Kingston, NH 03848 State \_\_\_\_\_ Zip Code \_\_\_\_\_

Tel No. 603-642-5551 Cell No. 978-479-5236

Business Name Boraczek's Septic & Drain LLC

Business Address:

Street 4 Hazel DR PO Box \_\_\_\_\_

City/town Hampstead State NH Zip Code 03841

Tel No. 603-329-6005 FAX No. 978-469-0733

New/Renewal

Fee 100.-

In Municipal Council,

\_\_\_\_\_ 20\_\_\_\_\_

Attest:

APPROVED [Signature]

DENIED \_\_\_\_\_

\_\_\_\_\_  
CITY CLERK

[Signature]  
CITY ENGINEER

*All bonds on file.*