

VALLEY VIEW SEWER DISTRICT
SIDE SEWER CONTRACTOR REGISTRATION
Phone (206) 242-3236 Fax (206) 242-1527

Date: _____

Business Name

Address

Phone

Fax

Foreman

Home Phone

State of Washington Contractor's License No: _____

Applicable City License: _____

List Emergency Phone Numbers for After Business Hours:

Name

Phone Number

Name

Phone Number

Name

Phone Number

List three sewer agencies you have worked for:

Agency

Phone Number

Agency

Phone Number

Agency

Phone Number

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Phone (206) 242-3236 Fax (206) 242-1527
INSURANCE REQUIREMENTS**

LIABILITY INSURANCE:

A Certificate of Liability Insurance with Valley View Sewer District listed as additional insured, and the following limits must be provided.

- | | | |
|-----------|--|--|
| 1. | General Liability | \$ 1,000,000 Each occurrence \$ 2,000,000 Aggregate |
| 2. | Vehicle Liability | \$ 1,000,000 Comb Single Limit |
| 3. | Cancellation endorsement of 30 days written notice. | |