

MARINE CONTRACTORS LICENSING BOARD

C/O MARYLAND DEPARTMENT OF THE ENVIRONMENT 1800 WASHINGTON BLVD., SUITE 430, BALTIMORE, MD 21230 410-537-3249 MDE.MCLB@ maryland.gov

APPLICATION FOR MARYLAND MARINE CONTRACTORS LICENSE (April 26, 2024)

Entity Applicant

PLEASE PRINT NEATLY OR TYPE ALL INFORMATION

This application form should be used for a person who has been designated as the representative member of an entity which has more than one employee. The person listed on this application will be the person sitting for the Marine Contractors License Test. Please refer to "Information for License Applicants" for details.

NOTE: On March 18, 2024 MDE promulgated regulations for the Marine Contractors Licensing Board at Code of Maryland Regulations (COMAR) 26.30. Among other things, these regulations established License Categories. There are four Categories of Marine Contractor Services (see Attachment 1).

In this Application the designated Representative is required to select, on behalf of their company, a single License Category that they qualify for. This selection is subject to the Board's review and approval, and should be based on their work experience and qualifications.

Section 1: APPLICANT INFORMATION

| Was your business previously a Licensed Marine Contractor in Maryland? | | | | | | | |
|--|-----|--|--|--|--|--|--|
| ☐ Yes ☐ No If yes, provide your License number(s): | | | | | | | |
| Representative Member: First NameLast Name | M.I | | | | | | |
| Trade Name / Business Name of entity: | | | | | | | |
| Business Address: | | | | | | | |
| Mailing Address (if different from Business Address): | | | | | | | |
| Primary Phone No.:Secondary or Cell Phone No.: | | | | | | | |
| Email Address: | | | | | | | |
| Representative Member Date of Birth/ | | | | | | | |
| Representative Member Social Security Number | | | | | | | |
| Section 2: BUSINESS INFORMATION | | | | | | | |
| List of the entity's owners, members, or partners: | | | | | | | |

| Representative Member Verification: (document connection to the business above) | | | | | | | |
|--|--|--|--|--|--|--|--|
| Federal Tax Identification Number: | | | | | | | |
| ☐ I do not have a federal tax identification number. | | | | | | | |
| Do you have commercial general liability insurance with a \$300,000 total aggregate minimum? | | | | | | | |
| ☐ Yes ☐ No (Required for issuance and to maintain license) Attach a copy of your certificate of insurance. | | | | | | | |
| | | | | | | | |
| Attach documentation for your workers compensation | | | | | | | |
| If you are exempt from obtaining workers' compensation insurance, please indicate the reason: | | | | | | | |
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| ANSWER ALL QUESTIONS - AN INCOMPLETE APPLICATION WILL BE RETURNED. | | | | | | | |
| Has your company ever had any business license (i.e. MHIC, Contractors License or equivalent) revoked, canceled or suspended in this or any other State? | | | | | | | |
| \square Yes \square No If yes, which State? | | | | | | | |
| License Number: | | | | | | | |
| Reason for cancellation or suspension: | | | | | | | |
| 2. Have you or your company ever performed marine contracting services in another State? | | | | | | | |
| $\square Yes \square No$ | | | | | | | |
| Indicate which State(s): | | | | | | | |
| 3. Are you or your company currently a licensed marine contractor in any other state? | | | | | | | |
| $\square Yes \square$ No If yes, attach a copy of the license(s) to this application. | | | | | | | |
| 4. How long have you (the representative) personally been engaged in the marine contracting profession? | | | | | | | |
| ☐ Full Time: Years: Months | | | | | | | |
| ☐ Part Time:Months Per Year ForYears | | | | | | | |

| Please provide documentation of your two years of full-time or cumulative part-time marine contractor experience, please explain briefly any similar contractor experience that you consider relevant to marine contracting. The documentation should show the present or former marine contractor employment. Examples of documentation of your employment such as IRS W-2's 1099 or K-1. Attach additional documents or explanation if necessary. | | | | | |
|---|-----------------------------------|--|--|--|--|
| 5 Lint do and a con- | C. 4'4' | | | | |
| 5. List the trade or | incutious names to be used w | while performing contracting services: | | | |
| | | complete address of the marine contracting company or is relevant to showing marine contracting experience). | | | |
| 7. Jurisdictions when counties or cities) | | ng Marine Contractor Services. (States or Maryland | | | |
| | | 3. 6. | | | |
| | xperience is required that justif | fies the Category selection (see Attachment 1). | | | |
| | | for (company name) | | | |
| | | for (company name) | | | |
| _ | rine Contractor License Cate | next to your Category selection. | | | |
| | Category 1: Heavy | y Marine Construction | | | |
| | Category 2: Resid | dential and Commercial Marine Construction | | | |
| | Category 3: Limit | ited Marine Construction | | | |
| og. 3 | Category 4: Incid | dental Marine Contractor Services | | | |

| 8. | List at least five (5) locations/sites where you have provided marine contractor services in Maryland or any other states in which your company operates. Please show the site owner name, site address, type of work performed and any state, federal or local permit numbers (if known). | | | | |
|----|--|--|--|--|--|
| | In order to provide sufficient information, an attachment for this information is encouraged. Be as specific as possible about the marine contractor work performed by the applicant for Representative. | | | | |
| | As a reminder, it is essential to include work locations that had marine contractor activities performed, that will justify your Category selection. This is particularly important if you are applying for a Category 1 or Category 2 license. | | | | |
| | 1 | | | | |
| | 2 | | | | |
| | 3 | | | | |
| | 4 | | | | |
| | 5 | | | | |
| 9. | List below any training courses or specialized training attended in the last two years which are directly related to marine contracting (which further show your experience and training in the marine contracting trade) | | | | |
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I hereby affirm that this application contains no willful misrepresentations or falsifications and that the information given herein is true and complete to the best of my knowledge and belief. I will, if necessary, submit affidavits to substantiate character, education and practical experience claimed. I am aware that should an investigation at any time disclose any misrepresentation or falsification, my application may be disapproved, or my license, if already issued, may be revoked.

Please be advised under Environment Article Title 17-403 penalties may be assessed for any person who violates any provision of Title 17. Marine Contractors, or any regulation adopted under this title.

| (Signature | of Applicant) | | | | | |
|--|------------------|-----------|------|--|--|--|
| | | | | | | |
| | | | | | | |
| (Printed Na | me of Applicant) | | | | | |
| | | AFFIDAVIT | | | | |
| | | State | | | | |
| | | County of | | | | |
| Subscribed and sworn to before me this | | day of | , 20 | | | |
| (Notary Seal) | | | _ | | | |
| Notary Public | | | | | | |
| My Commission Expires | | | | | | |
| | | | | | | |

In accordance with Executive Order 01.01.1983-18, the Maryland Department of Environment advises you of the following policy regarding the collection of personal information.

Personal information requested by the licensing agency of the Department is necessary in determining your eligibility for licensure. Such personal information is also intended for use as an additional means of verifying the licensee's identity or to enable the agency to communicate, in a timely manner with the licensee should the need arise. The licensee has a right to inspect her or his personal record and to amend or correct the personal data if necessary.

Personal information is generally available for inspection by the public only in accordance with the Maryland Public Information Act. Personal information is <u>not</u> routinely shared with state, federal or local governmental agencies.

<u>ATTACHMENT 1</u>

The four Marine Contractor License Categories.

Category 1: Heavy Marine Construction. This license category is suitable for contractors who perform, or solicit to perform, the following marine contractor services:

- (a) Bridges and highways, large scale commercial development, commercial dredging, cargo and naval wharfs, beach renourishment, heavy salvage, and any other large scale marine services, as approved by the Board.
 - (b) Marine contractors licensed under Category 1 may also perform any of the marine contractor services authorized under Categories 2, 3, and 4 of this section.

Category 2: Residential and Commercial Marine Construction. This license category is suitable for contractors who perform, or solicit to perform, the following marine contractor services:

- (a) Piers, docks, wharfs, marinas, boathouses, pile driving, moorings, boat lifts, floating docks, riprap revetments, bulkheads, weirs, seawalls, boat ramps, living shorelines, beach nourishment, dunes, dredging, salvage, and any other medium to small scale marine contractor services, as approved by the Board.
- (b) Marine contractors licensed under Category 2 may also perform any of the marine contractor services authorized under Categories 3 and 4 of this section.

Category 3: Limited Marine Construction. This license category is suitable for contractors who only perform, or solicit to perform, a limited subset of the marine contractor services listed in Category 2.

A Category 3 License only authorizes the specific marine contractor services identified in the License, as issued by the Board.

Category 4: Incidental Marine Contractor Services. This license category is suitable for contractors who perform, or solicit to perform, the following marine contractor services: directional boring, aquaculture, submerged aquatic vegetation and wetland grass planting, and any other related marine contractor services, as approved by the Board.