



THE COMMONWEALTH OF MASSACHUSETTS
DEPARTMENT OF PUBLIC UTILITIES

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MEMORANDUM

VIA EMAIL ONLY

TO: All Natural Gas and Liquefied Petroleum Gas Operators

FROM: Richard Enright,
Director, Pipeline Safety Division, Department of Public Utilities

RE: Guidelines for Annual Contractor Registration under 220 CMR 101.07

DATE: January 5, 2026

Under 220 CMR 101.07(1) and An Act Creating a Next Generation Roadmap for Massachusetts Climate Policy, St. 2021, c. 8 ("2021 Climate Act"), Contractors who wish to be eligible to receive contracts with an Operator to perform Gas Work shall be required to register annually with the Department of Public Utilities ("Department"). The Pipeline Safety Division ("Division") of the Department, pursuant to its authority under G.L. c. 164, §§ 76, 105(A), 220 CMR 69.02, and Delegation Order D.P.U. 18 44-B (2020), hereby directs Operators and Contractors to utilize the two attached forms to ensure compliance with the Contractor registration requirements.

Effective February 3, 2025, these forms shall be utilized by:

- 1) Each Contractor who wishes to be eligible to receive contracts with an Operator to perform Gas Work, as defined by 220 CMR 101.02; and
- 2) Each Operator who seeks to hire a Contractor to perform Gas Work, as defined by 220 CMR 101.02.

Contractor Registration

Contractor Registration is required annually if any of the following activities are within the scope of contracted work:

- 1) Activity requiring Operator Qualification; or
- 2) Activity requiring Liquefied Natural Gas (“LNG”) qualification or training; or
- 3) Activity requiring a Contractor to follow a PHMSA or DOT Drug and Alcohol plan;
or
- 4) Activity covered by the Operator’s Operations and Maintenance Manual (“O&M”).

Each Contractor must submit both registration forms (i.e., Attachment A and Attachment B) in electronic format only to DPU.ContractorReg@mass.gov. Attachment A shall be completed and executed by the Contractor. Attachment B shall be completed and executed by each Operator entering into a contract with the Contractor.

Operators and Contractors must provide complete and accurate responses to all fields. Failure to submit complete and accurate information may result in the denial and/or revocation of the Contractor’s registration status.

Please allow the Division at least 30 days to process these requests. The Division will send an email notifying the Operator and the Contractor whether the registration has been accepted or denied. Registration will be effective for one year from the date of approval by the Division.

Note: The Division will not process requests submitted by an Operator on behalf of a Contractor. The Contractor should also copy the Operator on the email to the Division.

If you have any questions, please feel free to contact me at (857) 214-1522 or Richard.Enright@mass.gov. Thank you for your prompt attention to this matter.

Contractor Registration
Attachment A:

Annual Contractor Registration Form
(To be Completed by Contractor)

Part A. Scope of Contract.

I, _____ /Contractor/, intend to contract with
_____ /Operator/ to perform Gas Work as defined
in 220 CMR 101.02. Specifically, the scope of work will be:

_____.

Effective start date of the contract: _____.

Part B. Certification of Good Standing with the Department of Public Utilities.

I, _____ /Contractor/, certify as follows: (Check the Box)
☐ Contractor is in good standing with the Department (Contractor has no past due civil penalties or consent order items and Contractor has no enforcement actions in Remedial Order status).

Part C. Operator Confirmation.

I, _____ /Contractor/, am providing an executed Operator
Confirmation Form from _____ /Operator/, attesting that I am in
compliance with the following (if applicable):

- a. 49 C.F.R. Part 192
- b. 49 C.F.R. Part 193
- c. 49 C.F.R. Part 199
- d. 49 C.F.R. Part 40

Part D. Signature and certification of Truth and Accuracy.

The undersigned, duly authorized, certifies that the information provided is true and accurate.

Signed: _____

Print Name: _____

Title: _____

Date: _____

Contractor Registration

Attachment B:

Annual Contractor Registration Form- Operator Confirmation
(To be Completed by Operator)

Part A. Scope of Contract.

I, _____ /Operator/, intend to contract with

_____ /Contractor/, who will perform Gas Work as
defined in 220 CMR 101.02. Specifically, the scope of work will be:

Effective start date of the contract: _____.

Part B. Operator Confirmation.

I, _____ /Operator/, affirm that _____ /Contractor/ is in
compliance with the following:

- | | |
|--|---|
| a. <input type="checkbox"/> 49 C.F.R. Part 192 | <input type="checkbox"/> Not applicable |
| b. <input type="checkbox"/> 49 C.F.R. Part 193 | <input type="checkbox"/> Not applicable |
| c. <input type="checkbox"/> 49 C.F.R. Part 199 | <input type="checkbox"/> Not applicable |
| d. <input type="checkbox"/> 49 C.F.R. Part 40 | <input type="checkbox"/> Not applicable |

Part C. Signature and Certification of Truth and Accuracy.

The undersigned, duly authorized, certifies that the information provided above is true and accurate.

Signed: _____

Print Name: _____

Title: _____

Date: _____