## APPLICATION FOR STREET OPENING PERMIT

Date:		
Applicant's Name:		Phone #:
Applicant's Address:		
Location of Proposed Opening(s):		
Block Lot		
Reason and Nature of Proposed Op	pening(s):	
Contractor:	Phone #:	
Contractor's Address:		
Describe Method of Construction:		
Estimated Size of Opening(s):	S.F.	
Approximate Starting Date:	te: Completion Date:	
APPLICANT'S OBLIGATIONS		
protect all utilities from damage. underground services located in 2. Applicant is entirely responsible way. 3. Notification of the Township Clehours in advance. 4. Notification to the Township Entire I herby certify that I have received Township Ordinance and agree to with the requirements of the pertinessigned:	Public utility companies must be that area prior to any construction for costs associated with the restoretk, Fire Department, Rescue Squagineer 48 hours in advance of the and read Chapter 303 (Streef follow all specified procedurent Township Ordinances.  Print Name/Ti	ration of anything disturbed within the road right-of- ad and Police of any roadway closure or blockage 48
Permit Fee \$	Check #	
Engineering/Inspection Fee \$		Received by
Bond Filed:		
Annroyed by		