

UPPER GWYNEDD TOWNSHIPTOWNSHIP STREET EXCAVATION AND OCCUPANCY PERMIT APPLICATION

Date: _____ Applicant Name: _____

Property Owner: _____ Phone # _____

Address: _____

E-mail Address: _____

Contractor: _____ Phone # _____

Address: _____

E-mail Address _____

Type of Work: _____

Location: _____

Sketch shall accompany this application and shall show location and details of work. **All work is to be done in accordance and subject to all conditions, restrictions and regulations prescribed by Upper Gwynedd Township** with the same force and effect as if written or printed here and under and subject to such special conditions, restrictions and regulations may be imposed by the Township. **All inspections must be scheduled 24 hours in advance.**

GENERAL INFORMATION

The road surface is (improved to a width of _____) (Unimproved _____).

Approximate start date: _____ Approximate completion date: _____

Excavators (will _____) (will not _____) require blasting.

The improved surface of the street (will _____) (will not _____) be opened.

Length of trench: _____ feet Width of trench: _____ feet Depth of trench: _____ feet

The utility poles are to be erected, _____ (# of poles) will be erected as shown, three (3) copies of accompanying sketch.

I/We agree to protect, defend, indemnify, and save harmless the Township, officers or agents thereof from all claims, suits, actions, and proceedings of every nature and kind whatsoever which may be brought against the Township officers or agents thereof, for or on account of any injuries or damages to persons and/or public property, due to any materials or applications and in the work or by or on account of improper materials or workmanship, or on account of any accident or any other act, negligence or omissions of said applicant or his agents, servant, or employees and the Township shall not in any way be liable therefore.

Should a Utility Company be applying for this permit, it will be the responsibility of said Company to remove any and all materials or debris from the area where the work is being done. ie..tree branches, stone, and any material brought by the Company for the job.

The applicant is (1) that person or persons who will be doing the excavating and (2) the property owner. Both persons must jointly make application for a Township Street Excavation and Occupancy Permit. Three (3) emergency phone numbers are required.

Name: _____ Phone: _____

Name: _____ Phone: _____

Name: _____ Phone: _____

I/We have read the above and agree to comply with all applicable Township and State requirements.

Owner: _____ Contractor: _____ Date: _____

FOR OFFICE USE ONLY

Permit Fee: \$ _____ Cash or Check # _____ Escrow Fee: \$ _____ Cash or Check # _____

Bond Escrow _____ Certificate of Insurance _____ Permit Issued By: _____ Date: _____

Deposit Refund to: _____ Date: _____

Address: _____

Street Cuts

Please Indicate:
Name of Street
Width of Street
Distance from nearest Intersection
Distance from nearest Manhole
House Number
Width of Cut
Length of Cut
Sewer, Water or other Utilities