



APPLICATION FOR ACCESS INTO CITY RIGHT OF WAY

Road Opening Permit

Permit No.# _____

Property Owner _____ Phone # _____

Address _____

Work Site _____

Applicant _____ Phone # _____

Address _____

Excavation Start Date _____ Finish Date _____

Excavation Dimension: _____ Ft. Wide

_____ Ft. Long

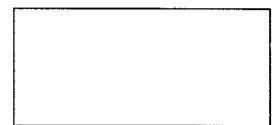
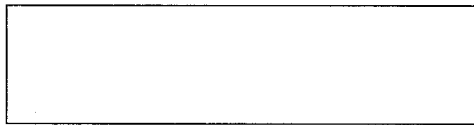
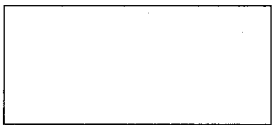
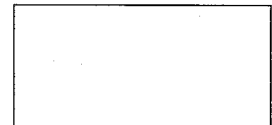
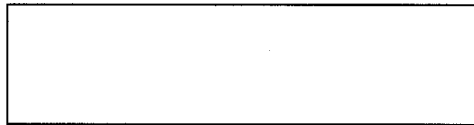
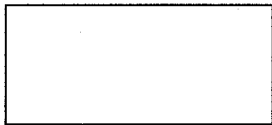
_____ Ft. Deep

Purpose of Excavation: _____

Pavement to be restored by if other than stated above: _____

Show location on sketch, (Name roads, distances, etc.) or attach a site plan:

LOCATION SKETCH



Continuation from page one

Describe any special conditions _____

Pen-nit fee of \$200.00 to be submitted with this application. Fee to be submitted in check or money order form payable to the City of Perth Amboy.

Restoration fee Of \$1,000.00 minimum per opening shall be submitted with this application prior to commencement of work.

Applicant must file insurance certificate as per Section 386-24 with the City Clerk Office prior to commencement of work.

A utility dig number must be obtain prior to excavation, (1-800-272-1000). All regulations must be completed prior to excavation.

Dig Number # _____

Applicant Name (print) _____

Applicant Signature _____ Date _____

This Section To Be Completed By Authorized Personnel Only

Date Received: _____

Received by: _____

Application fee:\$ _____ Restoration fee:\$ _____

Fee Received: _____

Approved: _____

Denied: _____

Comments _____

XC: Ernest W. Feist, City Engineer
Lt. Kacso, Traffic Bureau, P.A.P.D.