APPLICATION INSTRUCTIONS

- 1. COMPLETE TOP PORTION OF THE ATTACHED TWO (2) APPLICATIONS.
- 2. A CERTIFICATION OF INSURANCE (\$100,000 PER PERSON UP TO \$300,000) NAMING "GLOUCESTER TOWNSHIP" AS ADDITIONAL INSURED.
- 3. A SKETCH OR MAP OF THE OPENING.
- 4. TWO SEPARATE CHECKS:
 - 1. NON-REFUNDABLE APPLICATION FEE MADE OUT TO "THE TOWNSHIP OF GLOUCESTER" IN THE AMOUNT OF \$30.00
 - 2. ESCROW AMOUNT ACCORDING TO THE SIZE OF THE OPENING TO BE DETERMINED BY THE STREET INSPECTOR. THIS AMOUNT IS REFUNDED UPON FINAL INSPECTION.

PLEASE FEEL FREE TO CONTACT NANCY POWER IN THE TOWNSHIP CLERK'S OFFICE WITH ANY QUESTIONS/CONCERNS YOU MAY HAVE AT 856-228-4000 EXT 236.

CALL BEFORE YOU DIG 1-800-272-1000 FOR UTILITY LOCATIONS.

GLOUCESTER TOWNSHIP

APPLICATION #PERMIT #		OF	O-76-11 O-76-21		
T to UVIII T		ICATION			
: OBSTRUCTIO	N FXCAVATING &	OPENING OUR	ROADS & STREETS	3	
			PTION OF OPENING		
OWNER:		STREET:			
ADDRESS:					
		NATURE:	TUNNELING		
			CUTTING		
PHONE#			BREAKING ENCROACHMENT		
ADDI ICANT			ENCUMBER		
APPLICANT:			OTHER(DESCRIBE)		
ADDRESS:		PAVING SI	JRFACE:		
PHONE#			STREET CONDITION:		
		SIZE OF OPENING:			
CONTRACTOR:	AREA OF OPENING:SF				
ADDRESS:	DATE OF (DATE OF OPENING:			
PHONE#					
NOTICE TO UTILITIES:		CALL BEFORE YOU DIG 1-800-272-1000			
CERTIFICATE OF INSURANCE:		FOR UTI			
SKETCH ATTACHED:				*****	
PUBLIC WORKS APPROVAL	(FOR OFFI	CE USE ONLY)			
BY:	•	ŕ	ION FEE: \$	_DATE:	
INSPECTIONS APPROVAL:			O. BOND FILED:		
BACKFILL:	DATE:	DEPOSIT			
TEMP. REPAIR:	DATE:	EARTH OF	R GRAVEL \$100 & \$2.0	00 SF \$	
PERM. REPAIR:	DATE:	BLACKTO	P \$150 & \$3.0	00 SF \$	
FINAL:	DATE:	REINF.CO	NCRETE \$200 & \$5.0	00 SF \$	
ADDITIONAL INSPECTIONS REQUIRED:		CONCR.S	DEWALK \$100 & \$3.0	00 SF \$	
	DATE:	OTHER CO	ONCRETE \$100 & \$4.	00 SF \$	
		TOPSOIL	& SEED \$2.	00 SF \$	
	DATE:	DATE:	TOTAL DEF	POSIT \$	

DATE:_____ AMOUNT OF DEPOSIT RETURNED \$_____

GLOUCESTER TOWNSHIP

APPLICATION #		OF	RDINANCE. NO.	O-76-11
PERMIT #				O-76-21
•	APPLICAT	ION		
: OBSTRUCTION	N, EXCAVATING & OPE	NING OUR	ROADS & STREETS	3
	LOCATION	ON & DESCRIF	PTION OF OPENING	
OWNER:		STREET:		
ADDRESS:		PURPOSE:		
		NATURE:	TUNNELING	
PHONE#			CUTTING BREAKING	
			ENCROACHMENT	
APPLICANT:			ENCUMBER OTHER(DESCRIBE)	
ADDRESS:				
		PAVING SURFACE:		
PHONE#		STREET CONDITION:		
		SIZE OF OPENING:		
CONTRACTOR:		AREA OF OPENING: SF		
ADDRESS:		DATE OF OPENING:		
PHONE#				
NOTICE TO UTILITIES:				
CERTIFICATE OF INSURANCE:				
SKETCH ATTACHED:		******	•••••	******************
PUBLIC WORKS APPROVAL	(FOR OFFICE L			*
	•	-	`	DATE:
INSPECTIONS APPROVAL:	DAIL.	APPLICATION FEE: \$DATE: UTILITY CO. BOND FILED:		
BACKFILL:	DATE:	· : · ·		
TEMP. REPAIR:			R GRAVEL \$100 & \$2.0	00 SF \$
PERM. REPAIR:				•
FINAL:			NCRETE \$200 & \$5.0	
ADDITIONAL INSPECTIONS REQUIRED:			DEWALK \$100 & \$3.	
	DATE:	OTHER CO	ONCRETE \$100 & \$4.	00 SF \$
			SEED \$2.	00 SF \$
			TOTAL DEF	POSIT \$

DATE: ____ AMOUNT OF DEPOSIT RETURNED \$____