

DATE RECEIVED: _____

REC. BY: _____

PAVE CUT PERMIT APPLICATION

(In accordance with the Dupont Pave Cut Ordinances)

PROPERTY OWNERS/APPLICANT INFORMATION:

Name: _____

Address: _____
(Street) (City) (State) (Zip)

Phone #: _____ After Hours Emergency Contact #: _____

PROJECT INFORMATION:

() Location: _____ (Street, address, etc)

() Start Date: Finish Date: _____ Finish Date: _____

() Reason for cut: _____

() Approximate area of opening: _____ (Square foot, length and width etc.)

() Total Number of Cuts: _____

ADDITIONAL INFORMATION:

Certificate of Insurance of having General Liability and Workman's Compensation Insurance needs to be on file at the Borough Office. This can be faxed to the Borough office at (570) 655-6703.

THE FOLLOWING PROCEDURES MUST BE ADHERED TO IN ALL EXCAVATIONS IN THE BOROUGH OF DUPONT

We are asking you to follow a normal procedure of hauling away all excavated material, backfilling with 2A modified stone and thoroughly compacted in layers, each of which layers shall not exceed eight (8) inches in depth. Ordinance 96-23

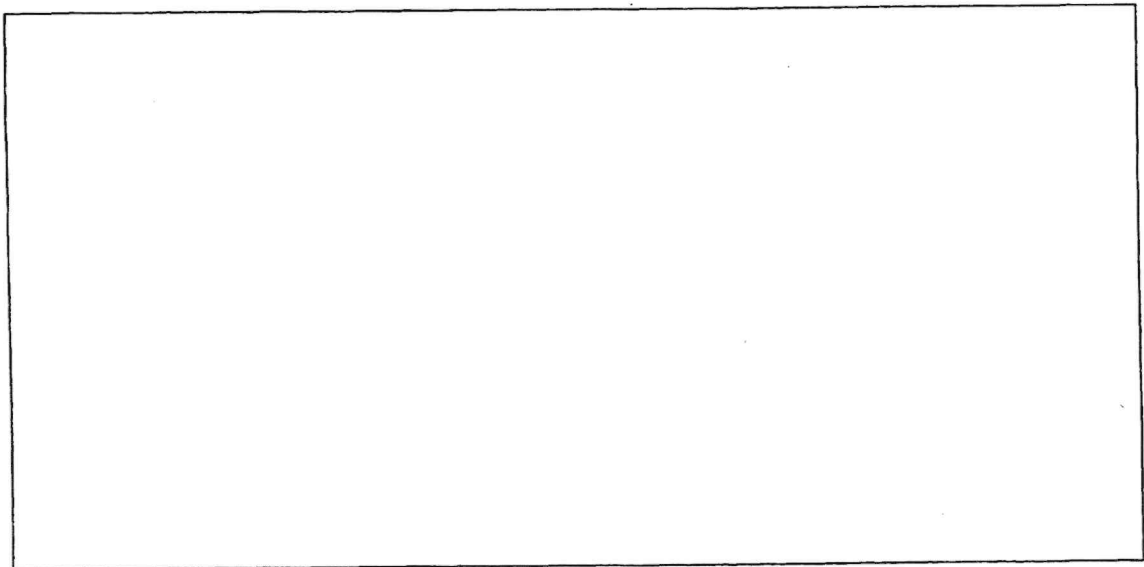
You will be responsible for the ditch and to correct any abnormalities within two years of completion.

I [we] hereby represent that the information provided herein submitted is true, correct and agree to obey all of the Ordinances and Laws of the Borough of Dupont and the Commonwealth of Pennsylvania to include but not limited to: Zoning Regulations, Protection of the Excavation, OSHA Regulations, and Maintenance and Protection of Traffic.

Owner/Applicant Signature

PLOT PLAN SKETCH

Rear Footage



S
I
D
E

F
O
O
T
A
G
E

Front Footage

THE FEE SHALL BE PAID BY CHECK OR MONEY ORDER AND SHALL BE MADE PAYABLE TO:
THE DUPONT BOROUGH.

Borough Use Only

Fee: 100.00 Denied/Issued: _____ Date: _____

Permit #: _____ Code Enforcement Officer: _____

Reason for Denial: _____

