

**** WORKSHEET FOR INFORMATION ONLY ****
ORIGINAL FORM MUST BE OBTAINED FROM THE BUILDING DEPARTMENT

Permit No. _____

**TOWNSHIP OF WYCKOFF
ROAD OPENING PERMIT**

Application Fee _____ Date _____ Dig. No. _____

Applicant _____

Address _____

Hereby make application to open _____

As shown on diagram below _____ or attached _____

Size of opening _____

Restoration of pavement by _____

Milling required Yes _____ No _____

Work will start on _____ Be Completed on _____

I agree to comply with all rules and regulations as specified in Township of Wyckoff Code, Chapter 165, Article III, Chapter 177, Article XIII and OSHA regulations. I have provided the following:

Performance Guarantee: Cash _____ Bond _____ Letter of credit _____

Certificate of Insurance _____ Signed Hold Harmless form _____

Inspection fee: Cash _____ Check _____

Signature

Print name & emergency # (24 hr.)

Permission is hereby granted:

Township Engineer

Date: _____

Township Clerk
