APPLICATION FOR STREET CUT / STREET BORING / EXCAVATION / FILL

PLEASE PRINT		DATE:
1.	NAME OF APPLICANT	PHONE
	ADDRESS	
2.	NAME OF CONTRACTOR_	PHONE
	ADDRESS	
3.	LOCATION / ADDRESS OF PROJECT (SITE PLAN REQUIRED)	
4.	PROPERTY TAX I.D. #(Permit will not be issued without to	ux I.D. number)
5.	REASON FOR: CUT/BORE	E/EXCAVATION/FILL (circle one)
	PROPOSED DEPTH	PROPOSED WIDTH
	CASING DIAMETER / LENC	GTH/MATERIAL
	PROPOSED BACKFILL MA	ΓERIAL
	PROPOSED RESURFACE M.	ATERIAL
		VEMENT REMOVAL
6.	LENGTH OF TIME FOR PRO	DJECT
7.	WILL A TEMPORARY PAVE	EMENT SURFACE BE NECESSARY?
	If yes, proposed material	Date of permanent repair
8.	FEE: \$25.00 SUBMITTED C	ON (Date) RECEIPT #
I a	gree to observe all requireme	nts of the Town Code relating to street excavation / boring.
Pr	inted name of Applicant	Signature
		For Office Use Only
Ar	oplication Approved	Approved with Contingencies Denied
-	-	ripproved with Contingencies
Da	ate	
	_	meeting MUTCD Construction Standards as needed. between water & sewer and minimum 18' vertical separation.
		el prior to beginning work. 219-322-6688
_	Restoration to be equal to or be	-
5)	Pothole water & sewer prior to	beginning work.
 Ри	blic Works Official	Planning & Building Official
Date of Signature		
va	o or premiure	Dute of Dignature

SITE PLAN, TAX I.D. and APPLICATION FEE ARE REQUIRED PRIOR TO APPLICATION AND ISSUANCE OF ROAD CUT.

Contractor is required to have a copy of this permit at the jobsite at all times.