Office Use Only
Date: _____
Rcd By: _____
Fee Rcd: _____
Check #: _____

Independence Township

34 Campbell Street
PO Box E
Avella, PA 15312
Phone: 724-587-3518 Fax: 724-587-5988
indtwpwashco@hky.com

ROAD OPENING PERMIT APPLICATION

Road Opening Permits are required for any work proposed in the Township Right of Way. A permit application, fees, bonding, and insurance documentation from the Applicant and/or contractor performing the work is to be submitted for any excavation work, or installation of, but not limited to, the following: Curbing, Paving, Storm & Sanitary sewers, Utilities.

Applicant's Name: _____ Phone: _____

Address: _____

_____

Site Location: _____TR#_____

Road Surface: Asphalt ___ Stone ___ Concrete ___ Other (_____)

Description of Work Proposed:

_____
_____
_____
_____
_____

(Please provide four (4) copies of plans for proposed work, including utilities.)

Cost Estimate: _____

Liability Insurance: _____ Policy # _____

(Attach Insurance Certificate.)

Applicant Signature: _____ Date: _____

Applicant agrees that all work in the Right of Way is to be completed in accordance with Township and/or PennDOT Specifications and subject to all applicable Statutes and Ordinances. Applicant is responsible for completion of the work approved and any reasonable incidental restoration deemed necessary by the Township. All work must be inspected by a representative of the Township prior to backfilling or concealment. Bonding/surely will not be released until the Township has approved final conditions. As-built plans may be required at the discretion of the Township. Applicant is resposible for related Township review and inspection costs.

FOR OFFICE USE ONLY

Complete Application Date Received:	_____	Permit #:	_____
Permit Fee	$_____	Pre-inspect Date:	_____
Plan Review	$_____	Plan Approved Date:	_____
Inspection	$_____	Final Inspection:	_____
Escrow/Deposit	$_____	Approved/Denied (reason):	_____
TOTAL FEES	**$_____**	_____	