

DAMASCUS TOWNSHIP ROAD OPENING PERMIT APPLICATION

60 Conklin Hill Road, Damascus, PA 18415 Tel. 570-224-4410 Fax 570-224-4940

Applicant Name _____

Address _____

City _____ St _____ Zip _____

Applicant Phone _____

Contractor _____

Contractor Address _____

City _____ St _____ Zip _____

Contractor Phone _____

Contractor Federal Identification Employer No _____

Job Site Location: Road Name _____

Nearest Intersecting Road _____ Dist _____ Ft

Near Intersection Driveway _____ Dist _____ Ft

Area _____ Zoning District _____

FIRM Flood Hazard Identification – Zone A AE X Panel # _____

Installation of Pipe Conduit Pipe Diam _____ Pipe Length _____

Road Crossing Or Parallel _____ Offset From Centerline (Parallel) _____

Proposed Start Date _____ Proposed Complete Date _____

Twp Row Width 33' 50' Twp Improved Width _____

Attach traffic control plans, including detour locations, times and dates proposed. Attach insurance certificates displaying Damascus Township as the Certificate Holder. Attach 2 sets of detailed plans including but not limited to cross-sections or profiles, plan view, backfill materials, finished surface materials, opening width, opening length, opening depth. The Township will determine fees and deposits required. Permit will be issued only after complete applications and plan approval and receipts of fees and deposits. False statements made relative to this application are a violation of law.

I certify that the information provided is true and correct to the best of my knowledge.

Applicant Signature _____ Date _____

******* Township Use Only *******

Fee Paid _____ Fee Paid Date _____ Deposit Paid _____

Deposit Paid Date _____ Deposit Return Amt _____

Deposit Return Date _____ Insurance Company _____

Insurance Limits _____ Traffic Control _____

Inspections _____

Issue Date _____ Expiration Date _____