

STREET OPENING APPLICATION

Borough of Jefferson Hills

925 Old Clairton Road

Jefferson Hills, PA 15025

Phone: 412-655-7760

Fax: 412-655-3143

Permit # _____

Applicant/Contractor:

Address:

City/State/Zip:

PHONE NOS:

Home: ()

Cell: ()

Work: ()

Email:

NAME OF STREET WHERE OPENING/EXCAVATION IS BEING CONDUCTED

NEAREST INTERSECTING STREET TO OPENING:

SIZE OF OPENING IN FEET:

WIDTH _____ DEPTH _____ LENGTH _____

DISTANCE OF OPENING FROM CURB OR PAVEMENT EDGE (FEET) _____

PURPOSE OF OPENING: _____

DATE WHEN WORK WILL START: _____

DATE WHEN WORK WILL BE COMPLETED: _____

PA ONE CALL COMPLETED? (Please check)

1-800-242-1776

I (We) hereby agree to be bound by the provisions of the ordinances, specifications, and regulations of the Borough of Jefferson Hills governing openings in or under municipal streets and to such special conditions, restrictions and regulations as may be imposed by the Public Service Coordinator.

APPLICANT/CONTRACTOR SIGNATURE: _____ DATE: _____

Do not write below this line

Fee Received \$ _____ Receipt/check # _____

The applicant is hereby authorized to make an opening in or under named street at the location designated; provided, however, all work is performed in accordance with the applicant's plans, the Borough Ordinances, specifications, and regulations governing street openings and the following special conditions:

Approved by: _____ Date: _____

Public Works Director for Borough of Jefferson Hills

Approved by Council (Over 500 Feet): _____ Date: _____

Borough Manager