

CROSS CREEK TOWNSHIP

28 CLARK AVENUE, AVELLA, PA 15312

Date Issued _____

Date Expired _____

APPLICATION FOR STREET OCCUPANCY PERMIT

(INSTRUCTIONS ON REVERSE)

Applicant _____ **Date Applied** _____

Address _____

City, State _____ **Zip Code** _____

Telephone _____

Date work is scheduled to begin: _____ Approximate Completion Date: _____

If Utility: Opening over 36 sq ft along/and or across street _____ FT. _____ FT. _____ FT.
in pavement in shoulder outside shoulder

If Utility: Installation Emergency Repair - E.P.C. No. Entry No. Repair
 Replace Service Connection or Disconnection Removal

One Call Serial No. _____

DESCRIPTION OF PROPOSED WORK

Name of Applicant's Consultant(s) _____ By: _____
(signature)

Telephone: _____

Name of Permittee's Contractor(s) must be furnished to the Township Office prior to the start of work.

Under and subject to all conditions, restrictions prescribed by the Township of Cross Creek Ordinance 1-74-01 and on the issued Permit and attachments thereto. The applicant certifies that this application, information and documentation therein or required by the Township is accurate pursuant to 18 PC C.S. 4904 relating to false swearing to authorities, and that is has or will have all insurance, bonds and other security required by the Township prior to performing any work authorized by the permit.

The applicant is (an individual) (a partnership) (a corporation incorporated under the laws of _____).

Signed on _____ Date _____ Name of Applicant _____

By _____ Signature _____

TOWNSHIP USE

	Number of Units	Unit Fee	
Permit Issuance Fee	_____ X	\$25.00 _____	<input type="checkbox"/> BOND \$ _____ (amount)
Opening 25' to 100'	_____ X	\$50.00 _____	
Trench/Tunnel	_____ X	\$50.00 _____	
Manholes	_____ X	\$25.00 _____	
* Degradation Fee	_____ X	\$18/14/10 _____	TOTAL <input type="text"/>

* See Ordinance 1-74-01

Initial Inspection _____ Comments: _____
(Date) (signature)

Final Inspection _____ Comments: _____
(Date) (signature)