ROAD OCCUPANCY PERMIT APPLICATION

Municipality in which work will be	e performed:			
PROPERTY INFORMATION				
Owner:		Phone #:		
Street Address:				
City/State/ Zip:			-	
Cell #:				
CONTRACTOR (UTILITY) INFO	RMATION			
Contractor:		Phone #:	THE PART OF THE PA	
Street Address:			_	
City/State/ Zip:			_	
Contact Person:			_	
Cell #:	Fax #:	Email:	-	
IMPROVEMENT INFORMATION	N:			
Exact location/address of excavation or other improvement (include nearest cross street):				
Purpose for which such opening or excavation is to be made:				
Approximate date work will begin: Length of time for work to be completed:				
Dimensions of road cut/excavation:				
**All work performed must be	in accordance with Richmond Tov	vnship Ordinance No. 2011-116	6 /Resolution 2016-10*	*
By signing and submitting this Road Occupancy Permit Application, I accept all liability for any damage to any person or property, including that of the Township, caused by the opening, excavating, or occupying of the street.				
By applying for this permit, I acknowledge that all information provided in this application is complete and accurate, that the work performed will be in conformance with the Pennsylvania Uniform Construction Code and/or any applicable ordinances of the municipality in which the work is to be performed as well as in accordance with the approved plan after a plan review has been completed. I understand that this is not a permit to begin work, but only an application for a permit and that work is not to start without a permit and that the fees for the permit may be doubled if work starts without a permit. I understand that if I give false information regarding this permit application that any permits issued based on this information will be invalid and the municipality could initiate legal proceedings against me, which could result in my being fined or imprisoned, or in the improvement being removed at my expense or any other legal remedy appropriate under the circumstances.				
Applicant Signature		Date		