



TOWNSHIP OF LONG HILL

COUNTY OF MORRIS
 GILLETTE, HOMESTEAD PARK, MEYERSVILLE, MILLINGTON, STIRLING

ENGINEERING OFFICE

APPLICATION FOR A ROAD OPENING PERMIT

FOR OFFICE USE			
Date Application Received:		Permit No:	
APPROVAL Date:		Zoning Application No:	
Application Fee Paid & Check Number:		Bond Paid & Check Number:	

All Applicants are required to submit the following:

- 1) Completed *Application for a Road Opening Permit*.
- 2) Submit a copy of a plan showing the exact location(s) and dimensions of all openings.
- 3) **APPLICATION FEE** – \$200.00; Check made payable to the Township of Long Hill.
- 4) **CASH BOND** – \$100.00 per square yard of disturbed area. This bond shall serve as a performance bond to guarantee completion of the work and also as a maintenance bond for a period of twelve (12) months to guarantee that the excavated area does not settle or otherwise deteriorate.

Location of Road Opening:			
Block:		Lot:	
		To Install:	<input type="checkbox"/> Gas <input type="checkbox"/> Sewer <input type="checkbox"/> Water <input type="checkbox"/> Electric <input type="checkbox"/> Other: _____
Applicant and/or Owner Information:		Contractor's Information:	
Name:		Name:	
Address:		Address:	
City & Zip:		City & Zip:	
Phone #:		Phone #:	
Email:		Email:	
Road is:	<input type="checkbox"/> Improved <input type="checkbox"/> Unimproved	Size of Opening:	_____ Square Yards
Request Permit Be Valid From:	_____ to _____		

CALL BEFORE YOU DIG for Utility Locations (1-800-272-1000) Reg. # _____

Further information Applicant feels relevant to this Application (describe in detail):

Location of Road Opening:	
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The Applicant and/or Contractor proposing to do the actual work shall file with the Township Clerk a Certificate of Insurance indicating that the Applicant and/or contractor and the Township of Long Hill, as a third party, are insured against claims for damages for personal injury as well as against claims for property damage which may arise out of or from the performance of the work. Insurance coverage / general liability insurance with combined policy limits shall not be less than \$1,000,000.

Name of Insurance Co.

Applicant agrees to replace, at his/her own cost and expense, in accordance with Township specifications and details, the opening to the same state and condition as it was at the time of the commencement of the work and further agrees to comply with all other regulations and laws relative to the work.

Signature of Applicant

Date

Applicant agrees to indemnify and hold harmless the Township from all loss, damage, claim or expense including expenses incurred in the defense of any litigation arising out of injury to any person or property resulting from any work done by the Applicant under the permit.

Signature of Applicant

Date

To the best of my knowledge, all of the above information is correct and I understand that the “Issuance of this permit does not relieve the Applicant from the obligation to obtain any and all permits and/or approvals from any other governmental agency having jurisdiction over the premises, whether local, county, state or federal, required for the development for which this permit is issued. Failure to obtain all such necessary permits or approvals may result in revocation of this permit”.

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Signature of Applicant

Date

FOR OFFICE USE	
<input type="checkbox"/> Application APPROVED	<input type="checkbox"/> Certificate of Insurance Received
<input type="checkbox"/> Application DENIED	
<input type="checkbox"/> Application APPROVED with conditions:	
Bond Calculation:	_____ Square Yards @ \$100.00/Square Yards = _____
DPW Comments:	
Engineer's Signature:	Date: