

HARMONY TOWNSHIP

2501 Woodland Road
Ambridge, PA 15003
Phone: 724-266-1910 Fax: 724-266-7330

APPLICATION FOR STREET OPENING APPLICATION NO. _____

Applicant: _____

Address: _____

City, State, Zip Code: _____

Telephone No.: _____ Fax No. _____

Purpose of Opening: _____
(Attach Drawing or Map)

Length (Feet) of street or sidewalk to be opened: _____

Size and Depth of Opening: _____
(Attach Drawing or Map)

Dates during which opening is requested: _____

Date when opening is to be refilled and temporarily resurfaced (Temporary surface to be maintained for at least two (2) weeks free of depressions.): _____

Public Liability Insurance (Minimum \$1,000,000): _____

Property Damage Insurance (Minimum \$100,000): _____

Deposit or Bond (Minimum \$500): _____
(Amount to be established by Harmony Township)

The Applicant agrees to perform all work in accordance with Ordinance No. 309, all Harmony Township Regulations, State laws, Federal laws, instructions and directions of the Harmony Township Engineer or other authorized agent of Harmony Township. The Applicant agrees to assume all liability in connection with the work described herein.

The Applicant acknowledges receipt of the Harmony Township Standard Restoration Details for street openings and understands the construction procedures and materials to be used in the replacement and restoration of all street openings. The Applicant acknowledges that the cost of inspection will be the sole expense of the Permittee.

Applicant

Date

HARMONY TOWNSHIP USE ONLY

Date Application Received: _____

By: _____ Permit Fee: _____

Check No. _____ Drawn on Account No.: _____

Bank: _____

2501 Woodland Road Ambridge, PA 15003 724-266-1910

STREET OPENING PERMIT
PERMIT NO. _____

Permission is hereby granted to:

Permittee: _____

Address: _____

City, State, Zip Code: _____

Telephone No.: _____ Fax No.: _____

Location of opening: _____

Dates during which opening is requested: _____

Date when opening is to be refilled and temporarily resurfaced: _____

Description and purpose of work: _____

The Harmony Township Board of Commissioners may at any time revoke and annul this Permit for non-performance of, or non-compliance with, any of the conditions, restrictions, and regulations hereof.

Approved this _____ day of _____, _____.

Harmony Township Signature or Seal

CERTIFICATE OF ROAD FOREMAN

As Road Foreman for Harmony Township, I do hereby certify that the holder of this Permit has faithfully complied with all the requirements as per Ordinance No. 309, its supplements and amendments, and in the performance of the work described in the Application filed preliminary to the issuance of such Permit, and that the street where such work was done has been properly repaired.

Signature Title Date

-IMPORTANT-

The terms and conditions embodied in this Permit require the Permittee to complete this work by the date specified herein. Where Permittee fails to comply with the condition as to completion of work by the date specified, the following rules will govern:

- A. Failure to start work by date specified for completion. Permit will be canceled unless Permittee desires an extension of time, in which case a revised Permit may be issued.
- B. Work started and not completed by specified date. Permittee will notify Harmony Township, prior to expiration of allotted time, of inability to complete the work on or before the date specified and request an extension of time. Such request shall be accompanied by the prescribed fee as established by Harmony Township.
- C. Permittee not desirous of carrying out proposed work. Permittee will notify Harmony Township prior to the date specified for completion that work will not be carried out; Permittee will return the Permit with such notice.

THIS PERMIT MUST BE RETURNED TO HARMONY TOWNSHIP TO OBTAIN A REFUND OF DEPOSIT OR BOND.