STREET OPENING APPLICATION

Borough of Jefferson Hills
925 Old Clairton Road
Jefferson Hills, PA 15025
Phone: 412-655-7735 Fax: 412-655-3143

Permit No. _____

Applicant/Contractor: _____
Address: _____
Email: _____ Phone Number: _____

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 (in feet) _____
Purpose of Opening: _____
Date when Work will Start: _____
Date when Work will be Completed: _____
PA One Call Completed (1-800-242-1776)? Yes ☐ No ☐

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.

_____ _____
Signature of Applicant Date

BOROUGH OFFICE USE ONLY

Fee Amount 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