

Office of the Township Engineer K2 Engineering, Inc. 234 Pittsburgh Street Uniontown, PA 15401 724-439-3440

## GEORGES TOWNSHIP

## **Right-of-Way Opening Application**

				Date:
Applicant Address:				
Phone Number:		Email	Address:	
Field Contact Name:		Field Contact	Number:	
Company Work Performed For:				
Job Start Date: Roadway Opening Address:				
Purpose of Opening:				
Scope of Work:				
	-			
Proposed Opening Size	Date of Backfill & Resu	ırface		811 Ticket Number
	* If Backfill date is unknown	wn nut -Will I	Notify-	
PERMIT REQUIREMENTS:	ii backiiii date is diikiio	vvii pac vviii i	Totaly	
You must have a Street Cut Perm	it in your possession while yo	ou work with	in the Townsh	nip Right of Way where
such work involves any of the foll				,
1. Opening of the street surface,	_	here in the to	wnship right	of way.
				•
<ol><li>Installation, replacement, repa</li></ol>	ir or adiustment of utility fac	cilities or othe	er structures.	
<ol><li>Installation, replacement, repa</li><li>Drilling of vent holes, augering</li></ol>	-			
3. Drilling of vent holes, augering	-			
3. Drilling of vent holes, augering APPLICATION FORM:	, or boring within Township	Right of Way		lo, how you intend to
3. Drilling of vent holes, augering APPLICATION FORM: Complete all items on the face of	g, or boring within Township this form. Describe in detail	Right of Way		lo, how you intend to
3. Drilling of vent holes, augering APPLICATION FORM:	this form. Describe in detail ials you intend to use.	Right of Way	ou intend to d	
3. Drilling of vent holes, augering APPLICATION FORM: Complete all items on the face of perform the work, and the mater To avoid delays, submit your app	this form. Describe in detail ials you intend to use.	Right of Way	ou intend to d	
3. Drilling of vent holes, augering APPLICATION FORM: Complete all items on the face of perform the work, and the mater To avoid delays, submit your app anticipated start of work. PLANS: Include a complete sketch of goo	this form. Describe in detail ials you intend to use. lication to the Township Eng	Right of Way what work you ineer's office on. The plans	ou intend to d at least 3 wor must clearly i	rking days prior to the
3. Drilling of vent holes, augering APPLICATION FORM: Complete all items on the face of perform the work, and the mater To avoid delays, submit your app anticipated start of work. PLANS: Include a complete sketch of goo and pertinent dimensions of both	this form. Describe in detail ials you intend to use. lication to the Township Eng	Right of Way what work you ineer's office on. The plans	ou intend to d at least 3 wor must clearly i	rking days prior to the
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Minimum fee is three square yards. Fractions are rounded to the next whole square yard A permit is required for each property address of cut.

- \* Inspection Fees patable to Township Engineer
- \* Permit Fee payable to Township