# Township of Plain Grove Application for Road Opening Permit

#### PLEASE PRINT

Applicant Information:			
Company name:		Contact person:	
Address:		Phone number:	
*	Code:		
Email Address:			
24 hour Emergency Contact Person:		24 hour Emergency Contact Phone #:	
24 nour Emergency Contact Person:		24 hour Emergency Contact I none #.	
<b>Contractor Information:</b>			
Company name:		Contact person:	
Address:		Phone number:	
Address.		Phone number.	
City: State: Zip of	Code:		
Property Information:			
Owner name:		Lot no.:	Block no.:
Owner address:			
owner daaress.			
City:	State:	Zip Code	:
<b>Road Opening Information:</b>			
Location of opening:	Dimension of opening:		
Type of surface to be disturbed (lawn, bituminous, co	oncrete, other)		
	, ,		
Character and purpose of proposed work:			
Detail restoration work:			
Requested start date of work:	Estimated com		
Estimated (		ipletion time:	
Daily work schedule:	Is Preconstruc	Is Preconstruction Meeting Required? (Twp Personnel)	
a.m. to p.m.			
		-	
Signature of Applicant:		Date:	
Approval of Township			

#### **Township of Plain Grove**

## **Road Opening Application Insurance Certification:**

The applicant as principal and where applicable a surety company licensed to do business in the State of Pennsylvania as surety shall file the following insurance certification:

The undersigned hereby certifies that a certificate of insurance is now in force and will remain in force for the duration of the project for which permit is sought, which is conditioned as follows:

- 1. To indemnify and hold harmless the Township, and all officers and employees of 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
- 2. To indemnify the Township of Plain Grove and all officers and employees of the Township for any expense incurred in enforcing any of the provisions of the Road Opening Permit Ordinance with respect to this application
- 3. To indemnify any person who shall sustain personal injuries or damage to his property as a result of any act or omission of the applicant, his agent, employees or subcontractors done in the course of any work under the permit.
- 4. The insurance covers all hazards likely to arise in connection with the work, including, but not limited to collapse and explosion, and also insures against liability arising from completed operations.
- 5. The limits of the policy of insurance are no less than those required by the Road Opening Permit Ordinance.

## PLEASE ATTACH A COPY OF YOUR INSURANCE CERTIFICATE

Signature of Applicant

Date

# Township of Plain Grove

### **Road Opening Permit Agreement**

I, the undersigned, agree to pay a road opening inspection fee in the amount to be determined by the Township of Plain Grove before the application can be processed. I further agree to pay for any reasonable costs incurred by the Township in the inspection of work performed under the road opening permit for which application is made, exceeding the fee already posted.

Where applicable, no permit shall be issued until the applicant shall have filed a performance guarantee in surety, cash, cashier's check or certified check in an amount determined to be sufficient by the Township. One guarantee may be accepted to cover a number of excavations by the same applicant. Guarantees shall remain in force for a period to be determined by the Township Roadmaster.

All checks are to be separate and made payable to "The Township of Plain Grove."

Date

Company/Contractor:	Contact Name:
Address:	Phone Number:
City: State: Zip Code:	
Bill to:	Date requested to start work:
Billing Address:	
Location and Dimensions of Openings:	

#### 

Signature of Applicant

Permit #:
Inspection fee due\$:
Bond amount due\$:
Approved by Township (Signature):
Date Approved: