

PERMIT NO.: _____

APPLICATION FOR STREET OPENING PERMIT
BOROUGH OF SEA BRIGHT
1167 OCEAN AVENUE
SEA BRIGHT, NJ 07764

DATE: _____

APPLICATION IS HEREBY MADE BY: _____

COMPANY NAME: _____

INDIVIDUAL'S NAME: _____ DEPARTMENT: _____

ADDRESS: _____

TELEPHONE: _____ EMAIL: _____

FOR A STREET OPENING AT: _____

BLOCK: _____ LOT: _____

EXCAVATION FOR PURPOSE OF: _____

SIZE OF OPENING: WIDTH: _____ LENGTH: _____ DEPTH: _____

TOTAL SQUARE FOOT OPENING: _____ SKETCH ATTACHED? _____

PROPOSED START DATE: _____ PROPOSED COMPLETION DATE: _____

WORK TO BE PERFORMED BY: _____

UTILITY MARKOUT NO. _____

VERBAL AGREEMENT: _____

BY: _____ TELEPHONE: _____

VERBAL PERMIT NO. _____

PERMIT FEE: _____ PERFORMANCE BOND: _____ ESCROW: _____

PERMIT AUTHORIZED BY: _____ DATE: _____

Administrative Assistant, Borough Clerk's Office

pc: Public Works
Police Department
Borough Engineer