

ROAD OCCUPANCY PERMIT APPLICATION

COOLBAUGH TOWNSHIP (LAUREL DRIVE), TOBYHANNA, PA. 18466

Date of Application _____ PERMIT NUMBER

Name of Applicant _____ Phone _____
Address _____ Zip _____

Road Name _____ Road No. _____ Station No. _____

Description and Purpose of Work Proposed _____

Date Work Will Begin _____ Date Work Will Be Complete _____

Poles and/or Towers:

Number of Poles and/or Towers to be Erected - - - - - _____
Distance from Centerline of Road to Edge of Proposed Structure - - - - - _____
Total Length of Proposed Work along Roadway - - - - - _____

Pipe Line, Conduits, Underground Utilities and Culverts:

Size of Openings in Pavement Surface (length and width) - - - - - _____
Size of Openings in Shoulder Surface (length and width) - - - - - _____
Size of Openings Outside of Cartway Surface (length and width) - - - - - _____
Total Length of Proposed Work - - - - - _____

Is Blasting Anticipated ___ Yes ___ No - - - Will Traffic Control be Involved ___ Yes ___ No

THIS APPLICATION IS UNDER AND SUBJECT TO ALL THE CONDITIONS, RESTRICTIONS AND REGULATIONS PRESCRIBED BY THE COOLBAUGH TWP. ROAD OPENING AND OCCUPANCY REGULATIONS, ORDINANCE NUMBER FIFTY-EIGHT WITH THE SAME FORCE AND EFFECT AS IF WRITTEN OR PRINTED HEREIN AND UNDER AND SUBJECT TO THE SPECIAL CONDITIONS, RESTRICTIONS AND REGULATIONS PERTAINING TO THIS APPLICATION AS HEREIN SET FORTH. BY HIS SIGNATURE HEREON THE APPLICANT DOES ACKNOWLEDGE AND ACCEPT ALL CONDITIONS AS SET FORTH IN ORDINANCE NO. 58.

(signature of applicant or authorized representative)

(BELOW THIS LINE FOR TOWNSHIP USE ONLY)

DATE OF COMPLETE SUBMISSION _____ Rec'd by _____

Material Submitted:

- _____ Completed Application
- _____ Plans of Facility (3 sets)
- _____ Traffic Control Plan
- _____ Blasting Liability Insurance
- _____ Blasting Release of Township
- _____ Fees - - - - - _____
- _____ Restoration Guarantee _____

ACTION TAKEN:

- _____ Granted as submitted.
- _____ Granted subject to the following items.
- _____ Rejected for the following reasons.
- _____ Denied for the following reasons.
- _____ Held for additional information

Date of Action _____

(ISSUING OFFICER)