

TOWNSHIP OF MENDHAM

BOX 520, BROOKSIDE, NJ 07926

Application for Road Opening Permit

Applicant's Name _____

Address _____ Phone No. _____

Name of Person or Firm doing work _____

Address _____ Phone No. _____

Location of Excavation (attach sketch or drawing) _____

Description of work to be done _____

For Service Connections or Curb Cuts:

Owner _____

Tax Map Block _____ Lot _____

Starting Date _____ Completion Date _____

Length of Excavation in feet _____ Width in feet _____

Square Yards of Pavement Affected _____

Name of Bonding Company _____

Address _____

Bond Expiration Date _____

Name of Insurance Company _____

Address _____

Insurance Expiration Date _____

Insurance Coverage:

- Personal Injury- One person (\$500,000. required)- Provided _____
- Personal Injury- One occurrence (\$1,000,000. required)- Provided _____
- Property Damage- One accident (\$500,000. required)- Provided _____
- Property Damage- All accidents (\$1,000,000. required)- Provided _____
- Auto Liability- One person (\$500,000. required)- Provided _____
- Auto Liability- One occurrence (\$1,000,000. required)- Provided _____
- Employer's Liability- Per occurrence (\$500,000. required)- Provided _____
- Worker's Compensation as required by law.

Fees Required

Applicant

Date

For Official Use Only

Completion Date _____

Application Fee _____

Performance Guarantee _____

Approved _____

Date _____

Mendham Township Supt. of Public Works