

Town Of Newburgh
Application for Right of Way Encroachment and Street Cut Permit

Permit Number: **2019** - _____ Application Date: _____

Applicant: _____ Phone: _____

Name of Company Performing Work: _____

Address: _____

Location of Construction Activities: _____

Description and purpose of Construction Activities: _____

Does the work require the closure of a public street? yes _____ no _____

Street closure requires approval of the Town Council.

I hereby certify that the information contained within is true and correct to the best of my knowledge. I agree to abide by all applicable laws of this jurisdiction and to inform the Zoning Administrator of any changes made affecting this application. Granting of a permit does not presume to give authority to violate or cancel the provisions of any other state or local law regulating construction or the performance of construction.

Name of Authorized Representative

Signature

Application Fee	\$ _____
Contract Preparation Fee	\$ _____
Encroachment Fee	\$ _____
TOTAL	\$ _____

Bond/Letter of Credit: _____

Zoning Administrator

*All fees are in accordance with Ordinance 2005-15, adopted October 12, 2005

Inspection Certification: _____

Date: _____

Comments: _____

Inspector:

Date: _____

Comments: _____

Inspector:

Approved:

Date: _____ Inspector: _____