



Washington Township, Dauphin County

185 Manors Road, Elizabethville, PA 17023

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Email: washingtontownship@wtwp.org

Township Roadway Cut / Use of ROW Permit Application

Date Applied For: _____

Name of Applicant: _____

Address: _____
Street City State Zip

Phone Number: _____ Cell Number: _____

Roadway Cut Information:

Township Road Name where road cut and use of ROW work will be done: _____

Description and purpose of work: _____

Proposed Start Date of Road Cut: _____

Proposed Finish Date: _____

Any work performed within the ROW of the township road, requires a sketch plan be submitted with this application. The sketch plan must contain the following information: exact location of the proposed opening, excavation, or boring and the approximate size and depth thereof and include pertinent details and specifications of the excavation. The sketch plan must show the location and complete details of the work proposed within the township right-of-way.

APPLICATION FOR PERMIT:

I hereby certify that the work shall be done in full compliance in accordance with Chapter 21, Streets and Sidewalks, Part 1, Street Excavations, of the Township Code, and the laws of the Commonwealth in relation thereto, and that I shall well and truly save, defend and keep harmless the Township from and indemnify it against any and all actions, suits, demands, payments, costs and charges for or by reason of the proposed opening or excavation, and all damages to person or property resulting in any manner therefrom, or occurring in the prosecution of the work connected therewith or from any other matter, cause or thing relating thereto. I shall also agree to pay the entire cost of the excavation and the replacement and upon my failure to do so the Township shall have the right to finish the work and recover the costs of excavation or the replacement plus 20% administrative fees in action of assumpsit or the filing of a municipal lien.

I further certify that I will notify PA ONE CALL AT (811) PRIOR TO THE START OF THE ROAD CUT.

Applicant's Signature: _____

Date: _____

THIS SECTION IS TO BE COMPLETED BY WASHINGTON TOWNSHIP

Approved Start Date: _____

Special Instructions:

Approved by Township Roadmaster: _____

Date: _____

Application Fee Paid: _____

Approved by Zoning/Codes Enf. Officer:(if applicable)

Date: _____

Approved by WT Board of Supervisors: (if applicable)

Date: _____