



## Street Opening Permit

Application For:

- Highway Occupancy
- Road Opening
- Underground Digging
- Burrowing
- Curb Cut
- Sidewalk Installation
- Driveway Installation

Route Nbr: \_\_\_\_\_

Road Name: \_\_\_\_\_

St Address: \_\_\_\_\_

Equipment: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Scope of work:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Includes Utility work?  Yes  No

If Yes, which Utility \_\_\_\_\_  New Installation  Replacement

Work will be performed within any of the following:

- |                                            |                                           |                                          |
|--------------------------------------------|-------------------------------------------|------------------------------------------|
| <input type="checkbox"/> Road Right of Way | <input type="checkbox"/> Road Pavement    | <input type="checkbox"/> Sidewalk        |
| <input type="checkbox"/> Driveway          | <input type="checkbox"/> Private Property | <input type="checkbox"/> Public Property |
| <input type="checkbox"/> Easements         | <input type="checkbox"/> Right of Ways    | <input type="checkbox"/> Other _____     |

Applicant: \_\_\_\_\_

Business Name: \_\_\_\_\_

Business Address: \_\_\_\_\_

Contact Person: \_\_\_\_\_

Telephone: \_\_\_\_\_ FAX: \_\_\_\_\_

Work Performed By: \_\_\_\_\_

Date Work to Begin: \_\_\_\_/\_\_\_\_/20\_\_\_\_ Expected Date of Completion: \_\_\_\_/\_\_\_\_/20\_\_\_\_

PA One Call Reported  Yes  No When: \_\_\_\_\_

In order for this application to be completed, a Certificate of Insurance must be provided with the following noted as certificate holder, mailed to Manor Borough, or FAXed to Manor Borough at 724-864-2439, or scanned (.pdf document) and emailed to administrator@manorborough.com **prior** to the start date.

An executed Release of Liability as provided by Manor Borough must accompany this application.

A completion bond  will  will not be required. Amount \$ \_\_\_\_\_

This application, denied or approved, shall not release the applicant from any claim or liability arising from the work performed by the applicant herein, and the applicant herein shall indemnify, defend, and hold harmless, Manor Borough from any claim arising from same. An approval of this application shall not constitute a waiver from any other conditions, restrictions, or regulations prescribed by Manor Borough, any county, state, or federal agency. The applicant further shall be liable for costs to complete any uncompleted work or restoration.

Signed and sealed this \_\_\_\_\_ day of \_\_\_\_\_, 20 \_\_\_\_\_.

APPLICANT \_\_\_\_\_  
Name

\_\_\_\_\_ Attested by: \_\_\_\_\_  
Witness Signature

Permit Issued \_\_\_\_\_ Permit Number \_\_\_\_\_ Permit Fee \$ \_\_\_\_\_ Permit Denied

Manor Borough

By \_\_\_\_\_

A copy of this application must be returned by the applicant following completion and dated below.

Date Completed \_\_\_/\_\_\_/20\_\_\_

Inspected by Manor Borough \_\_\_/\_\_\_/20\_\_\_ By \_\_\_\_\_

Satisfactory  Unsatisfactory

If Satisfactory, a copy of the application will be sent to applicant. If Unsatisfactory, an explanation and time frame to comply will be sent to applicant. Date Sent \_\_\_/\_\_\_/20\_\_\_