

BOROUGH OF DOWNINGTOWN APPLICATION FOR ROAD OPENING PERMIT

Applicant-Owner _____

Address _____

City _____

Zip Code _____

Phone # _____

Date work is scheduled to begin _____

Date when work will be completed _____

If Utility: Installation _____

Remove _____

Emergency Repair _____

Disconnect _____

Upgrade _____

Name of street where work is to be performed _____

PA One Call Serial # _____

DOWNINGTOWN, PENNSYLVANIA, _____, 20_____, THE UNDERSIGNED, HEREBY
Date

MAKES APPLICATION TO OPEN THE BED OF _____ AT LOCATION
Street Name

SHOWN BELOW, FOR THE PURPOSE OF _____

Office Use Only

Permit # _____
Fee \$ _____

Contractor _____

Contractor License # _____

of Openings _____

Size of Opening _____

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Code Officer

Public Works Director

Applicant Signature