

APPLICATION FOR TOWNSHIP ROAD OCCUPANCY PERMIT

Township:	Date:
County:	Fee:
	Mailing Address of Township
	Route #, Road, Street Name (where work is to be done)
Name of Applicant:	
Applicant Phone Number:	
Company Name:	
Company Address:	
Description of work that is to be comp	leted:
GENERAL: The road surface is improv	Work Completion: ved to a width of feet. Distance from the center line of feet. Distance from the center line of the road to the structure
	oles to be erected Nearest distance from the center of stance of proposed work along the road is feet.
NOT be opened. Approximate area of op	mproved surface of the road (please circle one) <u>WILL</u> or <u>WILL</u> beenings in improved surface: sq. yds. Approximate the Length of trench along the road feet. The depth of thes.
required THREE (3) copies of this f the location and details of the prop under, or within the limits of a l prescribed permit fee shall acco	ck performed within the right-of-way of a Township road form along with THREE (3) copies of a sketch plan showing osed work. Any work performed on a Township road over, imited access state highway requires a State Permit. The ompany the application and sketch. Schedule of fees are furnished upon request.

 Applicant Signature:

Date:

FEES ARE TO BE PAID BY CASH OR CHECK. PLEASE MAKE ALL CHECKS PAYABLE TO PLAINFIELD TOWNSHIP