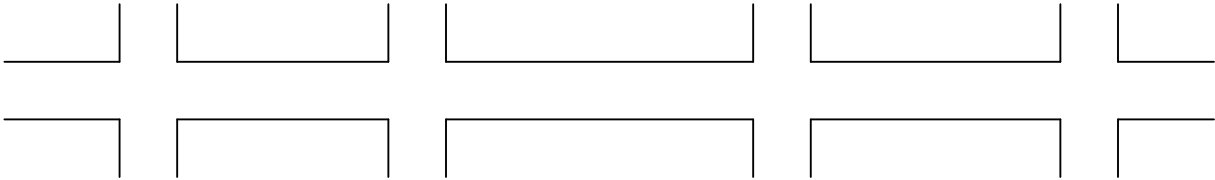


TOWNSHIP OF FAIRFIELD  
ESSEX COUNTY  
ROAD OPENING APPLICATION/**PERMIT**

Date \_\_\_\_\_

APPLICANT \_\_\_\_\_  
ADDRESS \_\_\_\_\_  
FOR (if not owner) \_\_\_\_\_  
LOCATION OF OPENING REQUESTED \_\_\_\_\_  
FOR WHAT PURPOSE \_\_\_\_\_  
WIDTH OF OPENING \_\_\_\_\_ DEPTH \_\_\_\_\_  
TYPE OF PAVEMENT TO BE CUT \_\_\_\_\_  
STARTING DATE \_\_\_\_\_ COMPLETION DATE \_\_\_\_\_

LOCATE OPENING IN DIAGRAM BELOW



The applicant agrees to comply with all applicable ordinances and laws relating to the work involved and the acceptance of the permit shall be deemed an agreement to abide by all its terms and conditions.

Signature \_\_\_\_\_  
Applicant

**The following are conditions of this permit:**

1. Working hours: 9:00 A.M. to 4:00 P.M.
2. Notify Township Police and Engineering Department 24 hours in advance of starting any work.
3. Back filling must be inspected by Township.
4. NOTE: All utility companies must locate their facilities at least four (4) feet away from municipal water and sewer mains.
5. Restoration to be in accordance with details attached.
6. **NOTICE:** Permit shall expire thirty (30) days after issuance if no work has been started, unless request in writing is made for extension.
7. Provide cash bond, amount (to be determined) \$ \_\_\_\_\_ held for 12 months.
8. Provide a certificate of insurance.

Permit Fee:\$5.00 \_\_\_\_\_ Inspection Fee:\$25.00 \_\_\_\_\_ Bond: \_\_\_\_\_

**PERMIT APPLICATION APPROVED BY** \_\_\_\_\_  
Municipal Engineer

Date \_\_\_\_\_

INSPECTOR'S REPORT

ADDRESS \_\_\_\_\_

WORK ACTUALLY STARTED \_\_\_\_\_ WORK COMPLETED \_\_\_\_\_

MATERIAL EXCAVATED \_\_\_\_\_

BACK FILL MATERIAL \_\_\_\_\_

PAVEMENT REPLACEMENT \_\_\_\_\_

REMARKS \_\_\_\_\_

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

\_\_\_\_\_  
Inspector

Date \_\_\_\_\_