

APPLICATION FOR EXCAVATION OF ROADS

TOWNSHIP OF GALLOWAY
PUBLIC WORKS DEPARTMENT
300 E. JIMMIE LEEDS ROAD
GALLOWAY, NEW JERSEY 08205
(609) 652-3700 EXT. 255

DATE _____

APPLICANTS REQUIREMENTS

1. A detailed diagram must be attached with this permit in triplicate
2. If more than one hole opening is requested, a complete list of each hole opening and size of opening must be attached with permit.
3. Inspections must be set up by appointment 24 hours in advance.
4. Infrared restoration is required on roads 5 years old or less. Openings must be saw cut and tacked unless infrared is used.
5. If County or State road, a road opening permit is required from such agencies.
6. It is the law to call 1-800-272-1000 or 811 before any digging is done.
7. PERMIT IS GOOD FOR 180 DAYS FROM START DATE

Name of Applicant _____ Phone _____ Ext. _____

Address of Applicant _____

Signature of Applicant _____

Signature

Print Name Clearly

MANDATORY

Name of Contractor _____ Phone _____ Ext. _____

Address of Contractor _____

Location of Excavation _____

Block _____ Lot _____

Estimated date of commencement _____

Estimated date of completion _____

Installation of a Service

Installation of a Main/Main Renewal

