



# STREET OPENING PERMIT APPLICATION TOWN OF GRAY MAINE

**For Office Use Only**  
Permit No: \_\_\_\_\_  
Date Submitted: \_\_\_\_\_  
Date Paid: \_\_\_\_\_

## APPLICANT

In accordance with the **Chapter 400 Street Ordinance, Section 4.4, Application for Permit**, the following person/s make application for a street opening at the location specified below.

The application must state the name and address of the applicant and an emergency phone number that will be answered twenty-four (24) hours per day, the type of work to be done, signatures of approval from utilities, name of the place and street number and purpose of the excavation, the date of commencement and date of completion of excavation.

The application must be accompanied by a diagram of the planned excavation submitted on an eight-and-one-half-inch by eleven-inch sketch showing trench locations, widths, depths, location of all barricades, warning signs, detour signs and detour routes and such other information as may be reasonably required by the Public Works Director.

Name		E-Mail Address	
Street Address		City/State/Zip	
Phone Number		Work Phone	

## PRIMARY CONTACT

Name		E-Mail Address	
Phone Number		Work Phone	

## PROPOSED WORK

### LOCATION MAP AND SKETCH PLAN REQUIRED AS ATTACHMENTS

Expected Start Date		Expected End Date	
Location/Address		Property Map/Lot	_____ - _____ - _____
GPS Coordinates	Starting Point:		
	Ending Point:		
Location Description			
Type of Installation			
Purpose of Installation			

## REQUIRED PLANS

- |   |  |
|---|--|
| <input type="checkbox"/> Sketch Plan    | <input type="checkbox"/> Utilities                               |
| <input type="checkbox"/> Road Profile   | <input type="checkbox"/> Drainage Plan                           |
| <input type="checkbox"/> Cross Section  | <input type="checkbox"/> Phosphorus Control Plan (if applicable) |
| <input type="checkbox"/> Sight Distance |  |

## SIGNATURES

*By signing this Application for a Street Opening Permit, the undersigned hereby certifies: a) that he/she is a duly authorized employee and representative of the entity identified above ("Applicant"); b) that the information provided herein is true and accurate; c) that the Application is understood to be for a limited period and that the Applicant, at its sole expense, may have to adjust, remove, or relocate its facilities in the future; and d) that the Applicant will maintain its facilities in accordance with MaineDOT's Utility Accommodation Rules (17-229 C.M.R. Chapter 205) and all other applicable laws.*

Applicant Signature:

Date:

## CODE ENFORCEMENT OFFICER APPROVAL

Signature/Title:

Date:

## PUBLIC WORKS APPROVAL

Signature/Title:

Date: