

# Town Of Raynham Highway Department

## APPLICATION FOR STREET OPENING PERMIT

Applicant Name/Company:

\_\_\_\_\_

(If different from Contractor)

Address: \_\_\_\_\_

Telephone: \_\_\_\_\_

Location of Street Opening: \_\_\_\_\_

Reason for Street Opening: \_\_\_\_\_  
(Example: water, sewer, driveway, etc.)

Expected Size of Trench: \_\_\_\_\_

**Attach a sketch or plan showing location and work to be done.**

Expected Start Date: \_\_\_\_\_ Dig Safe No. \_\_\_\_\_

Licensed Contractor: \_\_\_\_\_

Contact Person: \_\_\_\_\_

Address: \_\_\_\_\_

Telephone: \_\_\_\_\_

Emergency 24 Hr. Telephone Number: \_\_\_\_\_

Public Works Construction License Number: \_\_\_\_\_  
(Ex: 06-00-PWCL issued by Highway Dept.)

By signing in the space provided below the Applicant/Contractor acknowledges the benefit conveyed by receipt of this Street Opening Permit, hereby covenants and agrees to defend, indemnify and hold harmless the Awarding Authority and all of its officers, employees and agents of and from any and all claims, demands, suits or other proceedings and from any and all liabilities arising or claimed to have arisen out of, or to be in any way related to: (1) This application, (2) any Street Opening Work as defined in the Street Opening By-law or (3) any action or failure to act by Applicant/Contractor, its officers, employees, agents in connection with any work performed or failed to be performed by or on behalf of Applicant/Contractor in or under any Public Way in the Town.

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

**(This section for office use only)**

\$50.00 nonrefundable application/processing fee received: Yes No

Applicable refundable cash/check surety bond received: Yes No

Permit No. \_\_\_\_\_