APPLICATION FOR WORK WITHIN PUBLIC RIGHT OF WAY
TOWN OF SOMERS
PUBLIC WORKS DEPARTMENT
FEE $25.00

Name of Firm_____ Phone #_____

Address of Firm_____

Location of proposed work_____

Description of
Work_____

_____

Starting Date_____ Approx. time for completion_____

CBYD #_____ Traffic Service Control #_____

Sketch of proposed work: Indicate North	This section to be filled out by Town of Somers Pavement Cut (if any) Length_____ Width_____ Area_____ Est Pvt. Thickness_____ Non-Paved Disturbance Length_____ Width_____ Area_____ Bond Required_____ Staff Signature_____ Date_____
Applicant is responsible for contacting the Police Dept and CBYD	

I AGREE TO FURNISH TO THE TOWN OF SOMERS THE AMOUNT OF BOND REQUIRED AND TO REIMBURSE THE TOWN OF SOMERS FOR ANY EXPENSES INCURRED BY THE TOWN FOR MAINTENANCE OR REPAIR WORK IN CONNECTION WITH THIS PERMIT AND THAT I AM FAMILIAR WITH AND WILL ABIDE BY THE RULES AND REGULATIONS FOR PERMITS AS OUTLINED IN THE TOWN OF SOMERS WORK WITHIN PUBLIC RIGHT OF WAY GUIDELINES.

Signed_____ Date_____
Title: _____ License #_____