



West Lebanon Township
322 North 22nd Street, Lebanon, PA. 17046
Phone # (717) 274-1598 Fax: (717) 274-5119

Street Excavation Permit

Date of issue: \_\_\_\_\_ By \_\_\_\_\_ Permit# \_\_\_\_\_
(Township Official)
Invoice will be created upon approval of Street Excavation Application
Permit expires 90 days from the date of issuance. Permit Expiration Date: \_\_\_\_\_

PA-ONE Call # \_\_\_\_\_

It is the permit holder's responsibility to call PA One Call

Excavation Address \_\_\_\_\_

Applicant: OWNER \_\_\_\_\_ CONTRACTOR \_\_\_\_\_ PUBLIC UTILITY \_\_\_\_\_

Name: \_\_\_\_\_ Title: \_\_\_\_\_ Phone \_\_\_\_\_

Property Owner: \_\_\_\_\_

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

Additional Name(s): \_\_\_\_\_

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

EXACT LOCATION OF EXCAVATION:

Street/ Avenue \_\_\_\_\_

Proposed Starting Date: \_\_\_\_\_

Between \_\_\_\_\_

Proposed Completion Date: \_\_\_\_\_

Estimated Excavated Area: \_\_\_\_\_ Sq. Yds.

Description and Purpose of work: \_\_\_\_\_

Address Invoice to be Mailed to: \_\_\_\_\_

(Signature)

(Title)

(Date)

Attach sketch showing exact location of proposed cut in diagram of street(s).

EMERGENCY: YES \_\_\_\_\_ NO \_\_\_\_\_

Will Opening Work, Equipment, or Materials interfere with a Traffic Lane(s)? YES \_\_\_\_\_ NO \_\_\_\_\_

Is the Opening Located Within a Street Intersection? YES \_\_\_\_\_ NO \_\_\_\_\_

Application for EMERGENCY street cuts must be made to the Township within seven (7) days. Township must be contacted by phone when emergency work is being performed, or on next business day if after hours. (Monday-Thursday 9:00 a.m.-1:00 p.m.)

Security Bond/Letter of Credit Submitted with Application: Yes \_\_\_\_\_ No \_\_\_\_\_ Amount \$ \_\_\_\_\_

Certificate of Insurance submitted with Application: Yes \_\_\_\_\_ No \_\_\_\_\_ (If No, Township must have before issuing permit.)

**General Requirements**

1. No work shall be performed (except in emergency) before this application is approved and the permit is granted. A copy of the permit shall be available on site when work is in progress. Permittee must contact the Township Road Foreman **PRIOR** to commencement of job.
2. The permittee agrees to fulfill all terms of Township Ordinance 295.
3. Work Zone Traffic Control in accordance with PA DOT Publication 203, 212, 213.
4. Street cut restoration in accordance with Township Street cut Specifications.
5. All work must be completed between April 1 and November 15.
6. All restoration work to curbing, sidewalks and/or streets must be completed within 90 days of completion of project or by November 15.
7. Permittee is responsible for street restoration for a period of 24 month AFTER Final Inspection and Approved by Township Road Foreman.

I hereby agree to comply with all conditions, requirements, and provisions of West Lebanon Township Street Excavation Ordinance #295.

\_\_\_\_\_  
 (Signature of Owner/Firm Representative)

*Department Use Only*

Pavement Structure: Bituminous Mixture

Required Bond Amount: \$50,000.00 Bond on File: YES \_\_\_\_\_ NO \_\_\_\_\_

Resident: \$5,000.00 Insurance Certificate on File: YES \_\_\_\_\_ NO \_\_\_\_\_

Date of Security Bond or Letter of Credit Received \_\_\_\_\_ Amount: \_\_\_\_\_

FEES: Permit Fee: \$100.00  
 Inspection Fee: \$120.00 per hour  
 Degradation Fee: (If Applicable) N/A  
 Footage Fee: (\$1.50 per foot)

Schedule Item No.					TOTALS
Unit Fee per foot (\$1.50 per foot)	\$	\$	\$	\$	\$
Number of Units					
Total Fee	\$		\$	\$	\$

**INSPECTION RECORD**

DATE	COMMENTS