

TOWN OF CHATHAM HIGHWAY DEPARTMENT
865 CTY RTE 13, OLD CHATHAM, NEW YORK 120060
TELEPHONE: 518-794-7281, EMAIL: HIGHWAY@CHATHAMNEWYORK.US

TOWN HIGHWAY CONSTRUCTION PERMIT APPLICATION
PERMIT # C2019-_____

*The undersigned hereby applies for a Construction Permit to completely perform work within three (3) months from the date of issuance in accordance with the conditions and restrictions provided in the attached form PERMIT and any final conditions provided in the final PERMIT. **Copy of Certified Excavator Certificate must be submitted with Application.** Application fee of \$50.00 must be submitted with application before Permit is processed. (Check Payable To: Town of Chatham)*

Check # _____ **Excavator Certification #:** _____

Accepted By: _____ Date: _____

.....
APPLICANT: _____

MAILING ADDRESS: _____

TELEPHONE #: _____ **FAX:** _____

.....
ENGINEER/CONTRACTOR: _____

MAILING ADDRESS: _____

TELEPHONE #: _____ **FAX:** _____

.....
CONSTRUCTION SITE LOCATION: _____

.....
WHEREAS, a certain highway known as _____, No. _____ has been improved and is on the Town of Chatham Road System, and

WHEREAS, Applicant requests permission to:

as per sketch or map attached.

NOW, THEREFORE, permission is hereby granted to said _____ to do said work upon the following conditions.

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CONDITIONS AND RESTRICTIONS

This permit shall not be assigned or transferred without the written consent of the Town Superintendent of Highways.

The work authorized by this permit shall be performed under the supervision and to the satisfaction of the Town Superintendent of Highways or his representative.

The Town Superintendent of Highways shall be given _____ notice by said applicant of the date when it intends to begin the work authorized by this permit, and prompt notice of its completion.

The said applicant hereby agrees to hold the State, County and Town harmless on account of damages of any kind, which may arise during the progress of the work, authorized by this permit or by reason thereof.

Applicant certifies all persons concerned with actual work under this permit are duly covered by Workmen's Compensation Insurance and the State, County and Town shall be held harmless on account thereof.

The said Town Superintendent of Highways reserves the right to at any time revoke or annul this permit should the said applicant fail to comply with the terms and conditions upon which it is granted.

The applicant agrees to pay all necessary expenses incident to supervision and inspection by reason of the granting of such permit as certified by the Town Superintendent of Highways, such payment to be made within ten days from the rendering of the certified account.

Work under this permit to be commenced within ninety days from date of permit and continued in an expeditious manner.

The applicant shall submit a detailed plan of structure to be built, with a description of proposed method of construction.

Traffic shall be maintained by applicant on this section of the highway while the work is in progress and until its final completion.

A Certified Bond Check in the sum of \$ _____, payable to the Town of Chatham is to be on file deposited as security that the highway will restored to its original condition where

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disturbed at the expense of the applicant, as soon as the work has been completed, and the said Town Superintendent of Highways is hereby authorized to expend all or as much of said deposit as may be necessary for that purpose, should the said applicant neglect or refuse to perform the work.

SPECIAL CONDITIONS

IT'S THE LAW, CALL BEFORE YOU DIG.
Underground Facilities Protective Organization: 1-800-962-7962
GIVE AT LEAST THREE FULL WORKING DAYS NOTICE!
EXCAVATOR CERTIFICATION REQUIRED

In consideration of granting this permit the undersigned accepts it subject to conditions described.

_____ Date _____ Applicant (Signature)

Town Use Only

Date Received: _____	Date Inspected: _____
Date Permit Issued: _____	_____ Acceptable _____ Not Acceptable
_____ Highway Superintendent (Signature) _____ Date	_____ Highway Superintendent (Signature) _____ Date