

CITY OF BAYONNE DEPARTMENT OF ENGINEERING SIDEWALK AND ROADWAY PERMIT

No. _____ Block _____ Lot _____ Today's Date _____

⊕ PLEASE PRINT CLEARLY ⊕

Work Site _____ Contractor _____

Owner _____ Address _____

Address _____

_____ Email _____

Phone No. _____ Phone No. _____

Estimated Cost \$ _____ Registration No. _____

	Fees
<input type="checkbox"/> Ground Restoration Fee _____ Square Feet	_____
<input type="checkbox"/> Sidewalk Construction _____ Square Feet	_____
<input type="checkbox"/> New Curb Construction _____ Linear Feet	_____
<input type="checkbox"/> Curb Reconstruction _____ Linear Feet	_____
<input type="checkbox"/> Curb Cut _____ Linear Feet	_____
<input type="checkbox"/> Obstruct Roadway _____ # Days From: _____ To: _____	_____
<input type="checkbox"/> Roadway Opening(s) _____ Quantity Size(s) _____	_____
<input type="checkbox"/> Sidewalk Opening(s) _____ Quantity Size(s) _____	_____

<input type="checkbox"/> Sewer	"PSE&G ONLY" <input type="checkbox"/> GAS <input type="checkbox"/> ELECTRIC <input type="checkbox"/> Estimated Start Date _____ * <input type="checkbox"/> Completion Date _____ * (Emergency ONLY) ** ALL scheduled work must be called in 24 hrs. in advance.	Total	
<input type="checkbox"/> Water Service			
<input type="checkbox"/> Tank Removal		<input type="checkbox"/> Check No.	_____
		<input type="checkbox"/> Cash	_____

Mark Out No. _____

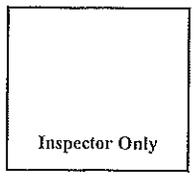
File No. _____

I hereby certify that the information is correct and accurate to the best of my knowledge.

Signature _____

City Engineer _____

By: _____



Document is Complete and Legible