



Office of Selectmen

_____	DATE: _____
Edward B. St. John, First Selectman	DATE: _____
_____	DATE: _____
Office of Tax Collector	DATE: _____

CHECK # _____	

Date: _____

APPLICATION FOR STREET OPENING PERMIT

This application must be filled out completely and mailed or delivered to the Office of Selectmen

PLEASE PRINT CLEARLY

APPLICATION IS HEREBY MADE FOR A PERMIT/NAME OF HIGHWAY (Describe briefly): _____ _____	
APPROXIMATE TIME REQUIRED TO COMPLETE WORK:	_____
DESIRED START DATE:	_____
PERMIT TO BE ISSUED TO:	_____
ADDRESS:	_____ _____

******Attach map of proposed work prepared by licensed engineer or surveyor******
*****Four inch street numbers must be posted at the end of the driveway for emergency vehicles*****

Before permit is issued, I agree to furnish a certified bank check or cash bond in the amount of 10% of the cost of the work and a certificate of insurance for bodily injury and property damage liability in the type and amount required. I agree to reimburse the Town of Middlebury for expenses and damages caused by the work execution; and to perform the work according to the regulations for permit work as stipulated in the current ordinance of the Town of Middlebury.

Signed: _____ Applicant	Telephone #: _____
The owner of the property for whom this work is being performed agrees to accept all future maintenance responsibility for the work as described herein:	
Signed: _____ Owner	Telephone #: _____