

## BOROUGH OF SPRING LAKE HEIGHTS

555 Brighton Avenue Spring Lake Heights, NJ 07762 Phone: 732-449-3500 Fax: 732-449-3535

## STREET OPENING APPLICATION

Date	Block:	Lot:	PERMIT #	
Address of Property:				
Owners Name and Address:				
Owner's Telephone No: Owner's Email:				
Company Performing Work:				
Company's Telephone No	o:	Company's Ema	nil:	
Type of work to be performed within Borough Right of Way trench opening				
Pavement Gas Water New/Replacement Water Service Tree Remova				
Driveway Cur	b Sewer _	New/Replacement S	Sewer Service Storm Sewer	
Telephone Ele	ctric Roadway _	Well installation	Grading Soil Boring	
If soil boring or monitoring well installation, please provide:				
NJDEP Permit/Case #: # of wells/borings & depth:				
Driller's name/address:				
To excavate trench	feet wide by	feet lo	ong by feet deep	
Total square foot of distu	rbance	For the purpose of laying		
Size pipe (conduits, etc.)		Completion Date:		
Road(s) on which work will occur:				
Nearest Intersection to work:				
Please include sketch of work area including road names, distances, etc. & describe any special conditions.				
Fee Schedule: \$300 under 25 square feet over 25 square feet \$300 +\$5 per sqft				
*Additional fees may apply with engineer review of project				
Signature Of Owner/Agent				
For Office Use Only	FeeReceiv	ved By	Date Ck#/Cash	
Approved	_ Not Approved		, Engineer	