

Village of Arcade
 17 Church Street • Arcade • NY • 14009
 (585) 492-1111 • phone
 (585) 496-7444 • fax

STREET OPENING PERMIT APPLICATION

A street opening permit must be issued under Village of Arcade (VOA) Local Law Chapter 55, Streets and Sidewalks prior to any excavation within the limits of any of the streets, alleys, or other public places in the VOA.

REQUIREMENTS: No work shall begin until all approvals/permits have been granted by the Superintendent of Public Works (or designee). Contact DIG SAFETLY prior to digging at 1-800-962-7962 or 811. A copy of this permit shall be kept on-site and presented upon request.

INSTRUCTIONS: Complete the information below. Property Owner and Contractor shall each provide certificates of liability insurance that must accompany this permit application. Every applicant must pay to the Village Clerk a deposit and fee as set forth on the fee schedule adopted by the VOA Board for each excavation.

REQUESTED DURATION OF PERMIT:	DATE FROM:	DATE TO:
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PROPERTY INFORMATION		
PROPERTY LOCATION:		
PROPERTY OWNER INFORMATION		
PERSON OR COMPANY DOING WORK - CHECK ONE:	[] Owner [] Contractor [] Other: _____	
LAST NAME:		
FIRST NAME:		MI:
COMPANY:		
ADDRESS:		
ADDRESS:		
PHONE NUMBER(S):	HOME/OFFICE #:	
	CELL #:	
	FAX #:	
CONTRACTOR INFORMATION:		
LAST NAME:	[] Same As Above	
FIRST NAME:		MI:
ADDRESS:		
ADDRESS:		
PHONE NUMBER(S):	HOME #:	
	CELL #:	

PROJECT DESCRIPTION
Description (size of opening(s) and type of work). Attached additional sheets as needed.

I certify that the above information is accurate, and I am the property owner or authorized by the owner to file this permit application on their behalf and that I will indemnify and hold the Village of Arcade harmless against any damage or injury that may be caused by or arise out of any entry onto the street right of way in connection with the processing of this permit application, during construction or performance of the work or within one year after the completion of the work. I understand that this permit is non-transferable and may be revoked for any default with respect to its conditions. I further understand that the use of explosives is not authorized under this permit.

Property Owner or Other Authorized Signature _____ Date _____

FOR VILLAGE OF ARCADE USE ONLY

OFFICE STAFF - Attach copy of check to application. - Forward to SPW		
<input type="checkbox"/> Property Owner Insurance Attached	Expiration Date: _____	<input type="checkbox"/> Fee Paid \$ _____
<input type="checkbox"/> Contractor Insurance Attached	Expiration Date: _____	<input type="checkbox"/> Deposit Paid \$ _____
SUPERINTENDENT OF PUBLIC WORKS - Forward to Clerk to create Work Order then to DPW Staff		
<input type="checkbox"/> Approved	<input type="checkbox"/> Denied	If Denied, explain: _____

Superintendent of Public Work's Signature (or designee) _____ Date _____

DEPARTMENT OF PUBLIC WORKS STAFF - Return to SPW			
<input type="checkbox"/> Inspection Complete	<input type="checkbox"/> Approved	<input type="checkbox"/> Denied	If Denied, explain: _____

Inspected By Signature _____ Date _____

CLERK/TREASURER (or designee)			
Date Deposit to be Refunded. One Year from Date Inspected		Date Refund Processed:	