



APPLICATION FOR STREET OPENING/SIDEWALK PERMIT
New Hope Borough, Bucks County, PA

Date _____

Permit # _____

Name of Applicant _____

Company _____

Address _____ Telephone _____

Location of Project _____

Description for Work _____

Starting Date _____ Approximate Completion Date _____

Fees, Costs, Insurance

1. Application Fee _____
2. Compliance Deposit _____
3. Compliance Bond Amount _____ Date _____
4. Insurance Certificate _____ Date _____

The applicant is (an individual) (a partnership) (a corporation incorporated under the laws of _____) or (a Public Utility under the jurisdiction of the P. U. C.)

I (we) assume all liability for any damages to person(s) or property accruing to the public or the Borough of New Hope, which may result from the performance of work in accordance with, and subject to, the conditions, restrictions and regulations of Chapter 21, Part 1 and Part 2A and C of the Borough of New Hope Code of Ordinances.

Witness or Attest: _____ By _____
Name and Title

Company _____

Borough Use only

Approved _____
Public Works Director

Compliance Bond on file _____ Insurance Certificate _____