PERMIT NO.:_____

TOWN OF DEDHAM
APPLICATION FOR STREET OPENING PERMIT

LOCATION OF EXCAVATION/OBSTRUCTION: _____
                                         Street No.   Street Name

CLOSEST INTERSECTING STREET: _____

DIG SAFE NO.: _____   EFFECTIVE DATE OF DIG SAFE NO.: _____

CONTRACTOR/UTILITY: _____   OWNER:_____
ADDRESS: _____   ADDRESS:_____
CITY/STATE/ZIP: _____   CITY/STATE/ZIP:_____
PHONE No.: (   ) ____-_____   24-Hr PHONE: (   ) ____-_____   PHONE No.: (   ) _____-_____
FAX No.: (   ) _____-_____ EMAIL: _____   EMAIL:_____

REASON(S) FOR EXCAVATION: EXCAVATION INFORMATION: TYPE(S) OF OBSTRUCTION:
(Check All That Apply)   (Check All That Apply)
☐   Sewer Service   Start Date:___/___/_____   Finish Date:___/___/_____   ☐   Dumpster
☐   Water Service   ☐   Pod
☐   Gas Service   Excavation Length (FT): _____   ☐   Construction Equipment
☐   Telephone Duct   Excavation Width (FT): _____   (Unregistered)
☐   Electric Cable   Total Area (L x W=Area Ft^2):_____   ☐   Construction Material
☐   Drainage   ☐   Other:
☐   Curb Cut   *SKETCH PROPOSED WORK ON ATTACHED SHEET*   Please Specify:_____
☐   Other:
    Please Specify: _____   Is work to be performed an emergency?:_____
                   _____   If YES, please explain: _____
                                                              _____

THE APPLICANT HAS READ, UNDERSTANDS, AND AGREES TO THE FOLLOWING TERMS OF THIS PERMIT:
1. All work performed under this permit is to be done in accordance with the latest versions of the Town of Dedham Street Opening Regulations and the Town of Dedham Design and Construction Standards.
2. Prior to excavation, the Applicant must call the Dedham-Westwood Water District at (781) 329-7090 to mark the water lines at the site. The Applicant must also call **DIG SAFE** for marking of other utilities. **DIG SAFE DOES NOT CALL THE DEDHAM-WESTWOOD WATER DISTRICT**.
3. The cost of said Street Opening Work within the Town's Right of Way including; labor, materials and any expense incurred necessary to perform the Street Opening Work in accordance with the regulations is the responsibility of the owner.
4. The Applicant is responsible to contact the Dedham Police Department for arrangement of details and payment of the details throughout the period of time that the Street Opening Work is conducted.
5. The Applicant is responsible to contact the Dedham Fire Department if blasting is to be performed as part of the Street Opening Work.
6. A performance bond in the sum of $5,000 is required for each Street Opening Permit granted that requires an excavation less than 200 square feet. For excavations that exceed 200 square feet, the performance bond shall be increased incrementally by $25 per each additional square foot of excavation. All bonds shall be in effect for a period of two (2) years from the date of application.
7. Special Conditions: _____ or;
    ☐   See Attachment A

APPLICANT NAME: _____APPLICANT SIGNATURE: _____DATE:_____

OFFICE USE ONLY				
	YES	N/A	Date	FEES:

FEES:
Application Fee ($50): $_____
Inspection Fee ($100): $_____
(D.P.U. & D.T.C. Utilities are exempt from inspection fee)

	YES	N/A	Date
Traffic Plan Attached	_____	_____	_____
Temporary Patch Installed	_____	_____	_____
Permanent Patch Installed	_____	_____	_____
Testing Reports Submitted	_____	_____	_____

Total: $_____

NOTES:

PUBLIC WORKS DEPARTMENT APPROVAL FOR PERMIT:

Signature _____ Date _____

INSPECTOR APPROVAL:

REVISED 03/03/2020

Signature _____ Date _____

TOWN OF DEDHAM
PROPOSED STREET OPENING WORK SKETCH

ADDRESS:_____

DATE:_____