

**BOROUGH OF TETERBORO
ROAD OPENING PERMIT**

BLOCK _____ **LOT** _____ **DATE:** _____

APPLICANT _____

ADDRESS _____

ESCROW REQUIRED \$1500.00 **CHECK #** _____

***All Checks Shall Include a Copy of W-9**

AMOUNT OF BOND POSTED _____ **DATE OF EXPIRATION** _____

ROAD OPENING PERMIT FEE: \$ 50.00 **CHECK #** _____

DESCRIPTION OF WORK: _____

NOTE: For sidewalk restoration please attach a more specific plan for limits of concrete replacement, including thickness and strength of concrete sidewalk/curb to be replaced is requested.

PROJECTED DATE OF WORK COMMENCEMENT: _____

PROJECTED DATE OF WORK COMPLETION: _____

REQUIREMENTS:

ENGINEERS INSPECTION: Boswell Engineering 201-641-0770

POLICE SUPERVISION: Moonachie Police 201-641-9100

Condition of Approval:

If the travel way of the roadway is cut it requires repair with infrared technologies. Additional requirement(s): _____

Approved by Borough Engineer **File Number** **DATE**