



MINE HILL TOWNSHIP

Municipal Building ~ 10 Baker Street ~ Mine Hill, New Jersey 07803

Laurie Betz

Director of Community Programs / Food Pantry Coordinator
Senior Support / Administrative Assistant

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Application for Road Opening Permit

Name of Applicant: _____

Company: _____

Address of Applicant: _____

Contact Telephone: _____

Name of Street Where Opening is to be Made: _____

Purpose of Road Opening: _____

Dimensions of Opening: Length _____ Width _____

Date(s) of Work: Start _____ Finish _____

If work is to be bonded: Name of Bonding Company _____

Address: _____

Amount of Bond: _____ Bond No.: _____

If Public Utility, Corporate Bond filed annually: \$ _____

Applicant Signature: _____

**PLEASE ATTACH A SKETCH OF THE PROPOSED ROAD OPENING
AND ANY OTHER AVAILABLE SUPPORTING DOCUMENTATION**

FOR MUNICIPAL USE ONLY

Application Received by: _____

Received Date: _____ Fee Collected: _____

Approved by: _____ Date Approved: _____