TOWN OF DENTON ROAD OPENING & DIRECTIONAL DRILLING PERMIT APPLICATION

	Planning & Codes	Date:	From:	
Attn:				
Email: Fax #:	drenshaw@dentoni 410-479-3534		nany.	
	410-479-3625	Comj	pany:	
110110		Fax #:	Phone#:	
Location	n of Work:			
Descrip	tion & Purpose of Wo	rk:		
Emerge	ncy: Yes No	Starting Date:	Completion Date:	
Estimate	ed Opening Area:	Sq.yds	Is Opening within a Street Intersection? *Yes No	
			naterials interfere with a Traffic Lane? *Yes No Naterials interfere with a Traffic Lane? No No Naterials interfere with a Traffic Lane?	
Provide	sketch below of propo	osed openings and/or	drillings including street names, curb line or edge of paving:	
		WEED OF THE CO	N. O.V.E. DEED M. T. O.V.E. V. O.G. TEED D. V. G. V. V.	
be perfo availabi	ormed (except in emer le on site when work is m date work is comple	gency) before this ap in progress. Applica	ON ONE PERMIT, ONLY IF LOCATED IN SAME BLOCK. No we opplication is approved and permit granted. A copy of the permit and agrees to restore road according to town specifications within fift notify this department by phone in emergency situations before pro	shall be een (15)
Signatu	re of person authorized	d to make application	Date:	
Date per	rmit approved:	By:	:Bond required? Yes No) <u> </u>
Special	conditions or instructi	ons:		
Final co	mpletion inspection d	ate:	By:	_
Accepte	ed Rejection	n Rea	ason:	





PAVEMENT & CONCRTE DETAILS PAVEMENT RESTORATION

REVISED				
DEC	2007			
APR	2021			

SHEET

PW-7.00