

North Whitehall Township



Lehigh County, Pennsylvania

3256 Levans Road Coplay, Pa 18037 Phone: 610-799-3411 / Fax: 610-799-9639

HIGHWAY OCCUPANCY PERMIT APPLICATION

PROJECT LOCATION (ADDRESS): _____	APPLICATION DATE: _____
APPLICANT NAME: _____	APPLICANT PHONE: _____
APPLICANT ADDRESS: _____	
APPLICANT EMAIL: _____	
CONTRACTOR NAME: _____	CONTRACTOR PHONE: _____
CONTRACTOR ADDRESS: _____	
CONTRACTOR EMAIL: _____	
PROPERTY OWNER NAME: _____	PROPERTY OWNER PHONE: _____
PROPERTY OWNER ADDRESS: _____	
PROPERTY OWNER EMAIL: _____	

TYPE OF WORK TO BE COMPLETED

FOR THE INSTALLATION OF: _____

- 1. OPEN THE ROAD SURFACE, ROAD SHOULDER OR TOWNSHIP RIGHT-OF-WAY BY EXCAVATION.
- 2. INSTALLATION OF UNDERGROUND FACILITIES BY EXCAVATION WITHIN THE ROAD SURFACE, SHOULDER, OR TOWNSHIP RIGHT-OF-WAY.
- 3. INSTALLATION OF ABOVE-GROUND FACILITIES BY EXCAVATION WITHIN THE ROAD SURFACE, SHOULDER, OR TOWNSHIP RIGHT-OF-WAY.
- 4. CONSTRUCT ROAD CROSSINGS OF ANY FACILITIES WHICH REQUIRE EXCAVATION THROUGH OR BORING UNDER A TOWNSHIP ROAD.
- 5. CONDUCT EARTHMOVING WITHIN THE ROAD SHOULDER OR TOWNSHIP RIGHT-OF-WAY FOR SIDEWALK, CURB, OR LANDSCAPING.
- 6. DIRECTIONAL BORING OR DRILLING UNDER TOWNSHIP ROADS AND RIGHT-OF-WAYS.

BASIC DATA APPLICABLE TO THIS APPLICATION (TO BE FILLED OUT BY APPLICANT)

- The road surface is (improved) (unimproved). (Please circle.)
- Improved width in feet _____.
- Approximate date when work will be started _____.
- Working days required to complete the work _____.
- Distance from center line of roadway to gutter or ditch _____ feet.
- Distance to property line _____ feet.
- Pipe necessary for road drainage.
 - a. Type _____
 - b. Length _____
 - c. Size _____

The applicant agrees to all conditions and restrictions in accordance with the accompanying site plan, Erosion & Sedimentation Control Plan, Grading Plan, and all other **applicable** permits for this project. These regulations are regulated by North Whitehall Township, as stated on the Highway Occupancy Permit.

Area with asphalt must be filled with 6-inches of stone, 4-inches binder and 2-inches wear surface and compacted between each layer. Roadway must be saw cut before final restoration. Also, surrounding area of saw cut must be sealed. All other areas of right-of-way must be filled in with 12-inch increments compacted between layers. Because of required inspections during progress of installation and before filling and completion, please contact, Public Works, at 610-799-3411, ext. 228, before completion of restoration project.

THE INFORMATION PROVIDED ON THIS APPLICATION BY THE APPLICANT(S)/REPRESENTATIVE(S) IS TRUE AND CORRECT TO THE BEST OF THEIR KNOWLEDGE AND BELIEF.

SIGNATURE OF AUTHORIZED REPRESENTATIVE	APPLICANT'S SIGNATURE	DATE
FOR OFFICE USE ONLY		
Review Approved/Denied by:		(Date)
(Inspector)		
APPLICATION FEE: <u>\$100.00</u>	ZONING DISTRICT	
CASH / CHECK # _____	ROAD OPENING PERMIT #	

APPLICATION FEE IS NON-REFUNDABLE