



Town of East Brookfield, Massachusetts

East Brookfield Highway Dept.

424 East Main St.

East Brookfield, Massachusetts 01515

APPLICATION FOR PERMIT TO OPEN A STREET

CONTRACTOR/OWNER: _____

TO OPEN THE STREET AT: _____

DESCRIBE LOCATION: _____

Describe scope of work to be performed:

The Contractor is required to make a deposit of a **\$5,000.00 Bond or a Certified Bank Check** for the faithful performance of this agreement. Said deposit will be refunded upon satisfactory completion of work. **The Town Requires at a minimum you mill and pave 1ft wider on both sides of cut.**

Application Fee of \$100.00 to be paid by a certified bank check

Dig Safe Number: _____

(Required upon submittal of this application)

Signed:

Contractor or Contractor's Agent: _____

Date: _____

Approve: _____

(Highway Superintendent)

Date: _____

Chief of Police: _____

Officer required: Yes _____ No _____

Date: _____



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The permit will expire one (1) year for the date of issue. There are no refunds if Permit is expired.

Town use:

Check Number for Bond: _____

Signature for excepting Bond: _____

Check Number for fee: _____

Signature for excepting Fee: _____

Permit Number: _____

Date issued: _____