

## Town of South Berwick Open Town Road/Street Application

**Applicant/Property Owner Information:** (MUST be signed by Property Owner.) **Permit #:** \_\_\_\_\_

Name: \_\_\_\_\_ Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Street: \_\_\_\_\_ City/Town: \_\_\_\_\_ State & Zip: \_\_\_\_\_

**Primary Contact/Contractor Information:** (Write "same" if primary contact for on-site work will be the Applicant.)

Name: \_\_\_\_\_ Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Street: \_\_\_\_\_ City/Town: \_\_\_\_\_ State & Zip: \_\_\_\_\_

*\*If work is for a utility, a Maine DOT Utility Location Permit Application shall be submitted to the Town (35-A MRSA sec. 2501-2507).*

**Proposed Work Information:** (To be completed by Applicant/Contractor.)

Road/Street Name: \_\_\_\_\_

Work location (roadway, shoulder, sidewalk, etc.): \_\_\_\_\_

Type of work proposed: \_\_\_\_\_

Who will perform the work?: \_\_\_\_\_

Anticipated schedule: Start date: \_\_\_\_\_ Completion date: \_\_\_\_\_

*\*Attach a plan indicating the roadway, location of work proposed, anticipated impacts, and any other reference features (23 MRSA sec.3358).*

**Existing Utilities:** (List all utilities in the work area; indicate whether or not they have been notified of the proposed work.)

<u>Utility Name</u>	<u>Underground</u>	<u>Above Ground</u>	<u>Notified?</u>
_____	<u>Yes / No</u>	<u>Yes / No</u>	<u>Yes / No</u>
_____	<u>Yes / No</u>	<u>Yes / No</u>	<u>Yes / No</u>
_____	<u>Yes / No</u>	<u>Yes / No</u>	<u>Yes / No</u>
_____	<u>Yes / No</u>	<u>Yes / No</u>	<u>Yes / No</u>

**DigSafe #:** \_\_\_\_\_

**Disturbed Surface Area & Permit Cost Information:** (To be completed by Applicant.)

<u>Surface Type</u>	<u>(A) Width</u>	<u>(B) Width</u>	<u>Est. Area (A x B)</u>	<u>Permit Cost</u>
Paved Surface: bituminous or treated surface/shoulders	Ft.	Ft.	Sq.Ft.	\$10.00
Concrete Surface: Portland Cement concrete or bituminous on concrete	Ft.	Ft.	Sq.Ft.	\$40.00
All Other Surfaces: plain gravel surface or shoulder or area outside roadbed	Ft.	Ft.	Sq.Ft.	\$ 5.00
Direct Buried Cable: low-impact installation of pipe/cable outside of the traveled way/shoulder		Ft.	Lin. Ft.	\$ 5.00
Work in addition to replacing pavement (specify)				
<b>TOTAL:</b>				

### FOR OFFICE USE ONLY

**MCR GROUP-PUBLIC WORKS**

**AR CLASS-STREET OPENINGS**

**RECEIPT NUMBER:** \_\_\_\_\_ **DATE ISSUED:** \_\_\_\_\_ **INITIALS:** \_\_\_\_\_

**NOTICE TO APPLICANT:** By signing this Application to Open Town Road/Street, the undersigned hereby certifies: a) that he/she is a duly authorized employee and representative of the utility/entity identified above (“Applicant”); b) that the information provided herein is true and accurate; c) that the Application is understood to be for a limited period (23 MRSA sec. 3351 & 3352) and that the Applicant, at its sole expense, may have to adjust, remove, or relocate its facilities in the future (35-A MRSA sec. 2504); and d) that the Applicant will maintain its facilities in accordance with all applicable laws.

**Applicant Signature (Permit Request):**

Signature: \_\_\_\_\_ Print Name: \_\_\_\_\_

Title: \_\_\_\_\_ Date: \_\_\_\_\_

Specific attention is directed to the requirement of 23 MRSA Section 3360-A, Protection of Underground Facilities (a.k.a. “The Dig Safe Law”) which requires notification to various entities at least three working days prior to making an excavation. Additional information may be found at: [www.digsafe.com](http://www.digsafe.com). The Applicant further agrees that, upon approval and issuance of a permit, the Department of Public Works will be notified in writing/email at least 48 hours in advance of any sort of work.

**Town Signature (Permit Approval):**

Date Received by Town: \_\_\_\_\_

Signature: \_\_\_\_\_ Print Name: \_\_\_\_\_

Title: \_\_\_\_\_ Date: \_\_\_\_\_

The Applicant shall be responsible for maintenance of the affected area until construction is accepted by the Director of Public Works. The Applicant is further advised that a representative from the Town of South Berwick will inspect the completed work to ensure the long-term acceptability of the repairs. The Director of Public Works shall inspect the street opening any time within 2 years following completion of the permanent resurfacing by the Applicant.

By signing this application below, the undersigned hereby certifies that all work complies with the following requirements, as applicable: (1) all conditions specified in or attached to the highway opening permit; (2) the Town of South Berwick's Street Opening and Culvert Ordinance enacted November 6, 2012; (3) the Department of Transportation’s Utility Accommodation Rule (17-229 CMR 210) when applicable; (4) all conditions of a Utility Location Permit issued (35-A MSRA 2501–2507); and (5) local ordinances and federal and state laws. In the event of a conflict between any applicable requirements, the more stringent requirement shall govern unless otherwise directed by the Town.

**Applicant Signature (Construction Complete):**

Signature: \_\_\_\_\_ Print Name: \_\_\_\_\_

Title: \_\_\_\_\_ Date: \_\_\_\_\_

**Town Signature (Construction Accepted):**

Date Received by Town: \_\_\_\_\_

Signature: \_\_\_\_\_ Print Name: \_\_\_\_\_

Title: \_\_\_\_\_ Date: \_\_\_\_\_

**APPLICANT: Make checks payable to the Town of South Berwick Maine.  
Bring Application and check to the Clerk’s office in the Town Hall.  
Note the address of Street Opening on the check.**

July 6<sup>th</sup>, 2022

Repaving back trench, grind 1' (12") each side of trench for top coat overlay

Infra Red will be requested on certain applications.

Jay Redimarker  
South Berwick, Maine  
Public Works Director  
603-534-4977