CAERNARVON TOWNSHIP

APPLICATION FOR HIGHWAY OCCUPANCY PERMIT

FOR DRIVEWAYS AND ACCESS DRIVES

APPLICANT - OWNER		DATE WORK IS SCHEDULED TO BEGIN
ADDRESS		APPROXIMATE DATE WHEN WORK WILL BE COMPLETED
POST OFFICE	ZIP CODE	PA ONE CALL SERIAL NUMBER
PHONE		CLASSIFICATION& VOLUME (BY TOWNSHIP)

TYPE	RESIDENTIAL	LOW	MEDIUM	HIGH

A DRAWING COMPLYING WITH ORDINANCES 168 AND 225 AND ANY REQUIRED SUPPORTING DATA MUST BE SUBMITTED

Driveway anticipated average daily traffic: _____ ADT CARS _____ ADT TRUCKS

_____ ADT BUSES _____ TOTAL ADT

ROAD NAME/ ROUTE NUMBER	DESCRIPTION OF PROPOSED WORK (DRIVEWAY: LENGTH, WIDTH, MATERIALS, ETC.)	REMARKS (TOWNSHIP USE ONLY)

Name of Contractor(s) (If applicable) _____ _____ (Address)

Phone _____

NAME OF PERMITTEE'S CONTRACTOR(S) MUST BE FURNISHED TO THE TOWNSHIP PRIOR TO START OF WORK

FEE PAID: _____ **ESCROW AMOUNT:** _____

DATE: _____

Signed on _____ _____

(DATE) (NAME OF APPLICANT)

Witness or Attest _____ By _____

(TITLE) (TITLE)

Approved by _____ _____

(TOWNSHIP OFFICIAL) (DATE)

A Copy of this Permit shall be kept on Site at all times. Immediately upon completion of work, permittee shall notify Township.

Subject to the Requirements of Township Ordinances168 and 225, as may be updated periodically.

Permit subject to any and all conditions of approval as stipulated by the Township and attached hereto.

MAIN AND CHESTNUT STREETS
3226 MAIN STREET
P.O. BOX 294
MORGANTOWN, PENNSYLVANIA 19546