

620 Franklin Farms Road Washington, Pennsylvania 15301 Phone: 724-228-3330 Fax: 724-228-2150

NORTH FRANKLIN TOWNSHIP ROAD OCCUPANCY PERMIT

All work under this permit is to be completed on or before:

Date Issued: _____

Total Fees: \$

*Permit VOID after this date. Immediately upon completion of the work, permittee should notify the Township

Permission is hereby granted to:

Permittee

WASHINGTON COUNTY

County NORTH FRANKLIN TWP.

Address

City / State / Zip

Twp Route #, Road or Street (Where work is to be done)

Township

Under and subject to all the conditions, restrictions, & regulations prescribed by the Township & on the general provisions & specifications, a true copy whereof is attached & made part hereof, with the same force and effects as if written or printed herein & under & subject to the special conditions, restrictions, & regulations hereinafter set forth.

(Description & Purpose of Work being performed)

The Township Board of Supervisors, mat at any time revoke and annul this permit for non-performance of, or non-compliance with any of the conditions, restrictions, & regulations hereof.

APPROVED:			
	Day	Month	Year
			Township Signature or Seal
		IMPORTANT	
The terms & conditions emb	odied in this permit require the permit	ttee to complete this work by the date sp	ecified, the following rules will govern:
	START WORK BY DATE SPECI ase a supplemental permit may be iss		ill be cancelled unless permittee desires an extension of
(b) WORK STAR	FED & NOT COMPLETED BY SP	ECIFIED DATE: Permittee will notify	y Township, prior to expiration of allotted time, of inability quest shall be accompanied by the prescribed fee.
			OUNT OF CHANGE IN CONDITIONS AFFECTING
			vill not be carried forward, returning the permit with such at they have been notified of cancellation PRIOR to the

The fees to be paid under the conditions in (a), (b), and (c) apply only to permits for which fees are collected in accordance with the fixed fee schedule adopted by ordinance and amended from time to time by resolution.

All notices relative to time extensions or cancellations shall be forwarded to the Township which issued the original permit.

The following Conditions, Restrictions & Regulations for restoration of the highway are the responsibility of the permittee:

The openings made in the pavement or shoulder must be backfilled with compacted aggregate (PA DOT 2A) above required pipe backfill. Backfill material shall be placed in loose layers not to exceed 8 inches if vibratory compaction equipment is used or as authorized under section 601.3(f) of PA DOT Publication 408. Compaction shall be completed to the bottom elevation of the proposed pavement. The pavement thickness should be at least as thick as the existing pavement thickness or a minimum of 8" (4" 25mm base course, 2.5" 19 mm binder course, 1.5" 9.5 mm wearing course), whichever is greater.

A minimum 15' length of roadway on both ends of the excavated area should be milled to a depth of 1.5" and re-surfaced with 1.5" of bituminous wearing course. If the excavated area is confined to a single lane, then the milled area should extend to the centerline of the roadway. If the excavated area extends beyond the centerline of the roadway, then the entire width of the roadway should be milled and re-surfaced.

If four or more openings are made by the same permittee within 100 linear feet of pavement, the Township may require the permittee to restore the entire disturbed pavement between the openings by milling and re-surfacing the entire disturbed pavement. The top of every manhole, valve box or other access to the facility shall be the same elevation as the surface in which it is located.

All proposed work is subject to review and approval by the North Franklin Township Engineer prior to work taking place. Once completed, all work is subject to review and approval by the Township Engineer prior to any bonds, escrows, etc. being released.

I/we, ______, on behalf of the Permittee,

acknowledge receipt of the above listed Conditions, Restrictions and Regulations and understand and accept responsibility to adhere to the guidelines herein.

Date_____

Ву:_____

Print Name:_____

Company Name:_____