



WESTPORT, CONNECTICUT

DEPARTMENT OF PUBLIC WORKS
TOWN HALL, 110 MYRTLE AVE.
WESTPORT, CT 06880
(203) 341-1120

PERMIT #

PERMIT FEE \$125.00

APPLICATION FOR ROAD OPENING PERMIT

LOCATION		PRIMARY() SECONDARY()
PURPOSE OF OPENING		
"CALL BEFORE YOU DIG" NO.		
STARTING DATE	TIME FOR COMPLETION	

CONTRACTOR'S INFORMATION

CONTRACTOR		PHONE #
MAILING ADDRESS		FAX #
ROAD OPENING BOND	CERTIFICATE OF INSURANCE	
Amount	Exp. Date:	Exp. Date

UTILITY COMPANY CONTRACTOR IS WORKING FOR, IF APPLICABLE.

UTILITY COMPANY	PHONE #
CONTACT PERSON	PHONE #
MAILING ADDRESS	FAX #

This permit is good for only 60 days from date hereof. If the work specific herein is not completed within that time period, this permit may be extended for a additional 60 days upon application to this office.

Before permit is issued, I agree to reimburse and hold the Town of Westport harmless for the expenses and damages caused by the execution of the work, and perform the work according to regulations of the Town of Westport.

Signature _____ Date ____/____/____
(Applicant)

(FOR OFFICE USE ONLY)

Issued By: _____ Date ____/____/____.

INSPECTION LOG

Approved By: _____ Date ____/____/____.