

**TOWN OF WISCASSET  
HIGHWAY DEPARTMENT  
WISCASSET, MAINE  
APPLICATION TO OPEN TOWN ROAD**

NAME OF APPLICANT:		DATE:	
ADDRESS OF APPLICANT:			
PHONE NUMBER OF APPLICANT:			
ROAD NAME:			
PURPOSE: WATER		DRAIN	SEWER DRAIN
		CURB CUT	OTHER
WORK TO BE DONE BY - CONTRACTOR'S NAME:			
CONTRACTOR'S ADDRESS:			
CONTRACTOR'S PHONE NUMBER:			
STARTING DATE:		COMPLETION DATE:	
UTILITIES:		DIG SAFE NO.	CONTACTED: YES / NO
SURFACE TYPE		COST (Per Sq Yd) or (Per Ft)	EST. AREA (Sq Yds) or (Ft)
			ESTIMATED PERMIT FEE
Bituminous Concrete/Bituminous treated surface or shoulders (minimum fee \$50.00)		\$50.00 (1)	\$
Plain gravel surface or shoulder (minimum fee \$25.00)		\$5.00 (2) \$0.20 ft. (2a)	\$
Work in addition to replacing pavement (Specify)			\$
Curb cuts/replacement		\$10.00 (4)	\$
IF ESTIMATED FEE IS \$1,000 OR LESS, PAYMENT OF 10% (ten percent) MUST ACCOMPANY THIS APPLICATION.			

**NOTES:**

1. \$50.00 per Sq. Yd. for the first 25 Sq. Yds, \$40.00 per Sq. Yd thereafter.
2. \$5.00 per Sq. Yd. for the first 25 Sq. Yds., \$4.00 per Sq. Yd thereafter.
- 2a. Buried cable shall be \$0.20 per foot.
3. \$75.00 per Sq. Yd. for Portland Cement Concrete or bituminous on concrete.
4. \$10.00 per Ft. plus surface replacement.

**NOTICE TO APPLICANT**

1. A person is to give a minimum of 48 hours notice, in writing, to utility companies or districts prior to excavating the road.
2. A person is to file copies of all notices with the Highway Department/Code Enforcement Officer/Town Office before any required permit is issued or certifies that such notices have been given.
3. Utility companies or districts must give written or verbal notice to other utility companies or districts prior to the excavation.

Your endorsement of this form certifies to the Highway Department that utility companies and districts have been notified in accordance with the requirements listed above.

**STATEMENT OF AGREEMENT**

I understand that the opening will be measured by a Representative of the Highway Department. I agree to pay any subsequent charges on the difference between those estimated and the accurate measurements. If total costs are found to be less than estimated fee paid, a refund will be made. (only refunds in excess of \$1.00 will be made.)

I agree to be responsible for all final restoration of the affected area to the satisfaction of the Highway Department.

SIGNATURE OF APPLICANT:	DATE:
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