



TOWN OF WESTON
DEPARTMENT OF
PUBLIC WORKS & FACILITIES

78 Old Hyde Road - Weston, CT 06883 - (203) 222-2662

ROADWAY OPENING PERMIT APPLICATION

Application must be filled in completely and hand delivered with bond and permit fee to: Weston DPW at 78 Old Hyde Road.

Application must be accompanied by detailed drawing of proposed roadway cut location, depth and purpose.

OFFICE USE ONLY:

Permit # _____: _____ Date Permit Form Received at DPW ____/____/____

Date DPW Notified Work Complete ____/____/____ Date of Final Inspection ____/____/____

Property Owner Information

Name of Property Owner: _____

Permit Property Address: _____

Street Number / Street Name Town State Zip

Property Owner Email: _____ Phone Number: _____

Applicant / Contractor Information

Name of Applicant: _____

Applicant Address: _____

Street Number / Street Name Town State Zip

Applicant Email: _____ Phone Number: _____

Is Applicant Performing the Work? YES / NO

Property Information

Property Lot Number: _____

Proposed Roadway Opening Distance to Nearest Wetlands: _____ Nearest Flood Zone: _____

Acknowledgement: Before permit is issued, I agree to furnish a cash bond in the amount of \$1200 and a \$40 permit fee made payable to the Town of Weston to reimburse the Town of Weston for expenses & damages caused by the execution of the work within the scope of this permit. Bond is eligible for refund 1 year after work is complete and inspection performed by the Town of Weston Public Works. I certify that I have read and understand the applicable Town of Weston ordinances governing the scope of this permit.

Applicant Signature: _____ Today's Date: ____/____/____

PERMIT EXPIRES 1 YEAR AFTER APPLICATION IS SUBMITTED

APPLICANTS SHALL CONTACT THE DEPARTMENT OF PUBLIC WORKS FOR INSPECTION

PERMIT APPROVAL SIGNATURE (DPW)

_____/_____/_____
PERMIT APPROVAL DATE