

Town of Madison Highway Department Road Opening Application

Applicant Information:		Date:
Name:	Company Name:	Pager/Cell:
Address:	Town/State/Zip:	Certificate of Liability on File: Yes <input type="checkbox"/> No <input type="checkbox"/>

Primary Contact Information: (Write "SAME" if the primary contact for on-site work will be the Applicant)		
Name:	Company Name:	Pager/Cell:
Address:	Town/State/Zip:	Fax/Email:

Proposed Work Information:		
Dig Safe Number:	Primary Street:	
Type of Work Proposed:	Secondary Street:	
Who Will Perform Work:	Street Address:	
Anticipated Work Schedule:	Starting Date:	Completion Date:
If this work is for a utility, has an application for a Utility Location Permit been submitted? Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>		
IS this work done in conjunction with a State or City road project? Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>		
Have all existing utilities in the work area been notified of the proposed work and given an opportunity to comment? Yes <input type="checkbox"/> No <input type="checkbox"/> <input type="checkbox"/>		

Surface Type:	(A) Unit Cost:	(B) Estimated Area	Impact Value (A) x (B)
Paved Surface: Bituminous Concrete or treated surface/shoulders.	\$50.00 per Sq. Yard	Sq. Yard(s)	\$
Concrete Surface: Portland Cement Concrete or Bituminous on concrete.	\$75.00 per Sq. Yard	Sq. Yard(s)	\$
All Other Surfaces: Plain gravel surface or shoulder or area outside roadbed.	\$5.00 per Sq. Yard	Sq. Yard(s)	\$
Other Work in addition to replacing pavement (Specify)			\$
Total Impact Value (Sum of all Impact Values)			\$
Permit Fee (\$75.00 & 10% of Total Impact Value)			\$

NOTICE TO APPLICANT: the Applicant is hereby notified that, upon approval of this application, all work shall comply with the following requirements, as applicable: (1) all conditions specified in the Highway Opening Permit; (2) the Department's Street Excavation Ordinance, Regulations and Policies; (3) the MDOT's Utility Accommodation Rule (17-229 CMR 210); (4) all conditions of a Utility Location Permit issued pursuant to 17-229 CMR 210; and (5) local ordinances and federal and state laws. In the event of a conflict between any applicable requirements, the more stringent requirement shall govern unless otherwise directed by the Department. Specific attention is directed to the following requirements: (1) Work zone traffic control standards as defined by the Manual on Uniform Traffic Control Devices (MUTCD); (2) Occupational Safety & Health Administration (OSHA) trenching and excavation standards; and (3) 23 MRSA Section 3360-A, Protection of Underground Facilities (a.k.a. "The Dig Safe® Law") which requires notification to various entities at least three working days prior to making any excavation. Additional information may be found at: <http://mutcd.fhwa.dot.gov>, <http://www.osha.gov/SLTC/trenchingexcavation/>, and www.digsafe.com respectively. The applicant further agrees that, upon approval and issuance of a permit, the Department will be notified at least 48 hours in advance of the start of any work. The Applicant shall be responsible for all final restoration of the affected area to the satisfaction of the Department of Public Works.

Applicant's Signature: _____ Date: _____

Code Enforcement Officer's Signature _____ Date: _____

Town Manager's Signature _____ Date: _____

Road Commissioner's Signature _____ Date: _____