



**TOWNSHIP OF EDISON**  
**DEPARTMENT OF PUBLIC WORKS**

**Thomas Lankey, Mayor**

Edison Municipal Complex  
100 Municipal Boulevard  
Edison, NJ 08817  
Tele: (732) 248-7288  
Fax: (732) 287-8345

**Application for Street Opening Permit**

Permit#: \_\_\_\_\_

Date: \_\_\_\_\_

**Applicant Information:**

Applicant Name: \_\_\_\_\_

Applicant Address: \_\_\_\_\_

Applicant Telephone: \_\_\_\_\_

Applicant Email: \_\_\_\_\_

**Work being performed:**

Location of Work: \_\_\_\_\_ Block/Lot: \_\_\_\_\_ / \_\_\_\_\_

Nearest Cross Street: \_\_\_\_\_

Type of Proposed Work: DRIVEWAY / SIDEWALK / APRON / CURB / ROAD RESTORATION / SEWER REPAIR / SUB-DIVISION / OTHER:

\_\_\_\_\_  
\_\_\_\_\_

Purpose of Proposed Work : \_\_\_\_\_

Square footage of Opening: \_\_\_\_\_

Proposed Start Date: \_\_\_\_\_ Proposed End Date: \_\_\_\_\_

Application Fee: \$200.00 - Late Application Fee: \$500.00

Security Deposit: \$20.00 per square foot - Minimum Deposit: \$200.00

**Be sure you have included the following items with your application:**

- Check for Application Fee
- Check for Bond
- To scale Plan or Sketch of Site
- Proof of General Liability Insurance
- Utility Markout
- Traffic Control Plan
- Written agreement to restore area as per Ordinance Specifications
- Copy of Site Improvement project (if applicable)
- Copy of Engineering Permit if Applicable

**Undersigned applicant hereby certifies the statements made in this application to be true and correct and that said applicant will comply with all ordinances of the Township of Edison regulating the opening of streets.**

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Print Name: \_\_\_\_\_