



CITY OF NEWBURYPORT

DEPARTMENT OF PUBLIC SERVICES
16A PERRY WAY
NEWBURYPORT, MA. 01950

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PERMIT APPLICATION FOR RIGHT OF WAY/UTILITY/TRENCH/ELECTRICAL ACCESS

BRING THIS COMPLETED APPLICATION TO THE ABOVE ADDRESS TO OBTAIN A PERMIT

Project Street: _____ **Project Name (if different):** _____

Today's Date: _____ Length of Trench/Curb cut: _____ Dig Safe #: _____

Name of Applicant: _____ **Email:** _____ **Phone # :** _____

Street Address: _____ **City:** _____ **State:** _____ **Zip Code:** _____

Name of Excavator: _____ **Phone #:** _____

Street Address: _____ **City:** _____ **State:** _____ **Zip Code:** _____

Phone #: _____ **MA Hoisting License #:** _____ **License Grade:** _____ **Exp. Date:** _____

Name of Property Owner: _____ **Phone #:** _____

Street Address: _____ **City:** _____ **State:** _____ **Zip Code:** _____

Insurance Certificate #: _____ **Exp. Date:** _____ **Name of Insurer:** _____

Name of Competent Person (as defined by 520 CMR 7.02): _____

Description, location, and purpose of proposed work: *Please describe the location of the proposed work and its purpose. If applicable provide a description of what is intended to be laid (e.g. pipes/cable lines, etc.)*

Type of Permit: (check all that apply) Approved permits are valid for 30 days from approval date.

- Sidewalk ROW Opening / Fee \$100
- Street ROW Opening/Fee \$100 plus \$2.00/sq./ft
- ROW Occupancy (dumpster, staging)/Fee \$50 per wk.
- Sidewalk Partnership Replacement Program / No Fee
- Electricity Access Permit / Fee \$25 per day/\$300 per mo.
- Sewer Service (new, repair, replace) Fee varies
- Water Service (new, repair, replace) Fee varies
- Curb Cut/Fee \$100 per application-DPS reviews
- Special Events(trash/staging) \$45 per hr./employee

Additional Information: (if checked, must be approved/initialed by DPS)

- Road Detour / Road Closure
- Storage of Materials on Private Way
- Disrupting Resident Right of Way (must attain abutter list)

Water Dept. Signature & Date: _____

Highway Dept. Signature & Date
(Final Approval/Denial)

Sewer Dept. Signature & Date: _____

Special Comments/Conditions: