

**THE CORPORATION OF THE TOWNSHIP OF EAST HAWKESBURY
BY-LAW NUMBER 2023-54 / SCHEDULE "B"**

**APPLICATION FOR A ROAD CUT PERMIT
PERMIT FOR A ROAD CUT – UTILITY COMPANIES**

Applicant's name (Utility Company): _____
Mailing address: _____
Street Address/PO Box # Town Postal Code
Contact Person Name (on site): _____ Cell (person on site): _____ EMAIL: _____

ADDRESS OF PROPOSED UTILITY INSTALATION: _____
ADDITIONAL LOCATION INFORMATION: _____
between / starting at (civic number) and/at (civic number)

**** WORK COMMENCEMENT AND TERMINATION DATES (60-day deadline) ****

in the Township of East Hawkesbury, and approved by: _____
Road Superintendent Issue Date

GENERAL CONDITIONS

I hereby confirm that the following public utilities have been notified through Ontario One Call (check those which apply):

- | | |
|---|---|
| <input type="checkbox"/> Municipal Road Department
(Water, Sanitary and Storm Sewer, Streetlights) | <input type="checkbox"/> Natural Gas (Enbridge) |
| <input type="checkbox"/> Hydro One Networks Inc. | <input type="checkbox"/> Bell |
| | <input type="checkbox"/> Cablevision |

I hereby agree to respect all conditions of this By-law.

I hereby certify that the person completing works under this By-Law carries a minimum of \$5 million dollars of Public Liability and Property Damage Insurance a copy is herby provided.

Name of Insurance Company: _____ Policy No. _____

I, the undersigned, hereby relieve the Township of East Hawkesbury, its officers, agents and/or employees, from any actions, losses, costs or damages incurred in the execution, lack of execution, or defective and/or substandard execution of any works authorized by this By-law, either by or without negligence from the permit holder, his/her officers, agents and/or employees.

I understand and agree that if works are not commenced within a sixty (60) day period from the issue date of this permit, the permit shall be null and void. In addition, the permit fee will be charged.

Under this By-law, the permit holder shall notify the Township of East Hawkesbury's Road Superintendent at least **two business days** before commencing the road cut, and for final inspections at **613-674-2170 ext 1004** or **613-677-1228**. jfsanterre@easthawkesbury.ca

OFFICE USE ONLY: Special Instructions from the Road Superintendent:

Utility installation shall be at least 1.5 m away from any Municipal infrastructure.

I have read, I understand and agree to comply with and be bound by the provisions of By-Law 2023-54 of The Corporation of the Township of East Hawkesbury and any amendments thereto.

Date Applicant's signature

Design of work to be done:

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Traffic control explanation and drawing:

OFFICE USE ONLY:

PERMIT NUMBER: _____

Note: The permit holder, for whom the works are to be undertaken, must pay immediately on request all fees for the reinstatement of the road.

Permit fees (not reimbursable)

Invoice No: _____ Invoice Date: _____

PERMIT FEE: \$ _____

Permit issued by: _____, Road Superintendant

FINAL INSPECTION: THE ABOVE NOTED WORKS HAVE BEEN: APPROVED NOT APPROVED

REASONS:

DATE

Road Superintendant