



17 North Main Street ☐ Medford ☐ NJ 08055 ☐ 609/654-2608

www.medfordtownship.com

MAIN FAX 609/953-4087

FINANCE FAX 609/714-1790

CONSTRUCTION FAX 609/953-7720

RECREATION FAX 609/654-6536

PUBLIC WORKS FAX 609/654-7646

APPLICATION FOR STREET OPENING PERMIT

DATE: _____

The _____ located at _____
(Name, Firm Name, Etc.) (Address)

_____ hereby requests permission to open the following
street address: _____

Block: _____ Lot: _____ for the purpose of _____

Do you have valid: Water Irrigation and or Sewer Permit

Utility Billing Approval: _____

Size of excavation will be _____ length, _____ width, _____ depth

Street will be opened on _____
(Date)

Is the opening longitudinal? _____
(Yes / No)

If so, how many properties will be served _____. The undersigned hereby agrees that he/she will comply with the provisions of the ordinance of the Township of Medford entitled AN ORDINANCE REGULATING THE MANNER AND METHOD OF OPENING STREETS, REQUIRING PERMITS THEREFORE, AND FIXING PENALTIES FOR THE VOILATION THEREFORE.

Name: _____ Telephone #: _____

Fee Deposited: \$ _____ Bond Deposited: \$ _____