



49 Union Street • Medford • NJ 08055 • 609/654-2608

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**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: \$ \_\_\_\_\_