

PORT ROYAL BOROUGH

Application for Excavation Permit

DATE: _____

NAME: _____

ADDRESS: _____

PHONE: Daytime _____ Evening _____

FEE \$ _____ PD. CK # _____ PER _____

CONSTRUCTION SITE ADDRESS: _____

PROPOSED ACTIVITY WILL BEGIN: _____
(Month) (Day) (Year)

PROPOSED ACTIVITY WILL BE COMPLETED: _____
(Month) (Day) (Year)

DESCRIPTION & PURPOSE OF CONSTRUCTION: _____

PLEASE ATTACH COPY OF SKETCH PLAN OF PROPOSED EXCAVATION.

The undersigned being the applicant and/or landowner hereby certifies that the work to be done pursuant to this Application shall be done in full compliance with all Ordinances of the Port Royal Borough and the laws of the Commonwealth of Pennsylvania, and the applicant and/or landowner shall well and truly sav, defend, and keep harmless the Borough from, and indemnify it, against any and all actions, suits, demands, payments, costs, and charges for or by reason of the proposed activity as described herein, and all damages to persons or property resulting in any anner therefrom or occurring in the

prosecution of the work connected therewith or from any other matter, cause, or thing relating thereto.

Applicant

Landowner

Applicant

Landowner

Permit Officer

Date Approved: _____

Original of this form is to be maintained by Port Royal Borough and a copy, after approval is to be returned to the applicant and/or landowner.