



Office of Building Compliance & Land Use
Town of Seymour, Connecticut
Excavation Permit

Permit # _____

DATE: _____

Business Name or Applicant's Name _____ Address of Applicant _____

Applicant's Phone Number _____ Applicant's Email Address _____ Bond Company/Bond Number _____

Owner's Name _____ Owner's Address _____ Owner's Phone Number _____

Application Date _____ Excavation Date Range _____ CBYD Number _____

Street Address _____ Cross Street 1 _____ Cross Street 2 or Dead End _____

Instructions

- Applications Must be submitted to the Office of the Building Inspector. Located at 1 First St. Seymour.
- Applicants are responsible for scheduling inspections with Town Engineer (203) 881-8145.
- Applicant must contact Seymour Police to coordinate traffic control
- The issued permit shall be a copy of this application signed by the Director of Public Works or Town Engineer
- Certificate of insurance, copy of license and certificate of bond (\$10,000) must be provided with completed application.

PURPOSE OF APPLICATION :

- Utility building service
- Utility mains
- Sanitary sewer building service
- Sanitary sewer main
- Connection to storm sewer
- Emergency Work – Work Complete at time of Application

PLEASE CIRCLE:

Install driveway sidewalk curb
 Repair driveway sidewalk curb
 Other _____

Authorized by: _____
Sewer Administrator or Town Engineer

ADDITIONAL INFORMATION:

- 1) Work being performed for: _____
Property Owner, Subdivision or Project Name
- 2) Name(s) of Subcontractor(s): _____
State License. #: _____
- 3) Will this work restrict normal two-way traffic or require road closures? Yes No
- 4) Has the road for which the work is being performed been paved within the last 5 years? Yes No

If the answer to #4 is YES -> Patch limits Must be from Curb to Curb or Edge to Edge



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The applicant hereby affirms the veracity of the information contained herein agrees to conform to the ordinances and regulation of the Boards, Agencies, and Departments of the Town of Seymour and to hold said town harmless from any claim for any injury, damage or loss to persons or property which may arise in any manner by reason of such construction and furthermore to restore the public right of ways where the excavation was made in a safe condition acceptable to the reasonable satisfaction of the Town Engineer or his agent until the permanent patch is installed. This permit may be revoked at any time for a breach of conditions. As witness whereof, the applicant has signed his name to this application.

Applicant's Name & Title Printed	Applicant's Signature	Date
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Seymour Town Engineer - Bryan Nesteriak

Conditions of Permit

- 1) The Town Engineer **must** be notified **48 hours** in **advance** of the start of any work authorized under this permit, (203) 881-8145.
- 2) Work authorized under this permit shall **not** commence **until** the second day following the date of issue.
- 3) This permit is valid for ninety (**90**) days after its date of issue.
- 4) Compaction equipment is **required** to be on site at **all times** and shall be utilized during all backfilling operations.
- 5) The permittee shall **notify** the Town Engineer's office when the trench will be ready to backfill, and wait for the inspector to arrive before backfilling any opening in a right-of-way. Any backfill placed in the absence of the inspector shall be removed and replaced to the satisfaction of the inspector.
- 6) The **permittee** is **responsible** for maintaining the temporary pavement until all settlement has ceased and the permanent pavement has been installed. The Town will notify the permittee of the installation of the permanent pavement.
- 7) The **permittee** is **responsible** for maintaining adequate traffic control devices throughout the excavation period.

Excavation Restoration:

- | | | | |
|-----------------------------------------------------|--------------------------------|---------------------------------------|-----------------------------------|
| <input type="radio"/> Curb to Curb Pavement Repair | <input type="radio"/> Striping | <input type="radio"/> Epoxy | <input type="radio"/> Paint |
| <input type="radio"/> Crown to Curb Pavement Repair | <input type="radio"/> Asphalt | <input type="radio"/> Concrete | <input type="radio"/> Curb Repair |
| | <input type="radio"/> Sealant | <input type="radio"/> Sidewalk Repair | |

Permit Number: _____

Permit Fee Due: _____ **--> PAID:** **Check #:** _____

Received By : _____