

Borough of Freemansburg

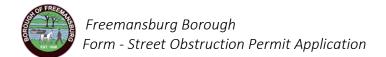
600 Monroe Street, Freemansburg, PA. 18017 Phone: (610)866-2220 Fax: (610)868-2402

Street Obstruction Permit Application

- * A permit must be obtained prior to obstructing any street or right-of-way.
- * Street obstruction permits are valid for a maximum of 30 days from the date of issuance.
- * No more than three (3) permits will be issued to a Company or Individual in one (1) calendar year.

Applicant Information	on (Attach a Photocopy	of Driver's License/ID)	
Applicant Name:			
Driver's License/ID Number:			State Issued:
Address:			
Phone #:	E	Email Address:	
Storage Container o	r Roll-Off Company Info	rmation (If Applicable)	
Company Name:			
Address:			
naming the "B		urg" as additional insu	eriod with liability coverage and red is to be submitted by the
Obstruction Informa	ition		
Motor Home	Moving Container	Roll-Off Container	Other:
Length:	Width:	Height:	Weight:
Additional Informat	ion:		

` '	ial map snowing proposed location of obstruction)
Location (Include street name(s) and ad	dress):
Obstruction must be:	
* 30' away from an intersection;	
* 15' away from a fire hydrant;	
* 10' away from a driveway; and	
* Only placed in areas where parkin	रु is permitted.
Date(s) Permit requested for:	thru
Permit Acceptance and Liability (To be si	gned by authorized company representative or applicant)
accordance with Ordinance# 2015-005. hold harmless and defend the Borough any and all claims resulting from injurio	street or right-of-way in the Borough of Freemansburg in For consideration of such permission, I agree to indemnify of Freemansburg, it's officers, agents and employees, from es, including death, damages or losses, including, but now arise or which may be alleged to have arisen out of, or in
Applicant Name	Signature
Certification	
and correct to the best of his or her kno	n in this application and the attached documents are true wledge and belief. This verification is made subject to the vania Crimes Code (18 P.A. C.S. § 4904) relating to unsworn
Applicant Name	Signature
	 Date



Staff Use Only			
Date Application Received: Received By:			
Is Application Complete:			
Public Works Supervisor Comments:			
Police Chief Comments:			
Date(s) Permit Approved for thru			
Permit No.: Date Issued:			