

**FRANKLIN TOWNSHIP**  
**STREET OPENING PERMIT APPLICATION**

Applicant Name: \_\_\_\_\_

Applicant Address: \_\_\_\_\_

Applicant Telephone #: \_\_\_\_\_

Contractor Name: \_\_\_\_\_

Contractor Address: \_\_\_\_\_

Contractor Telephone # \_\_\_\_\_

Location of Proposed Street Opening: \_\_\_\_\_

Proposed Date for Completion: From: \_\_\_\_\_ To: \_\_\_\_\_

Dimensions of  
Proposed Opening(s) In \_\_\_\_\_ (length) \_\_\_\_\_ (width) \_\_\_\_\_ (depth)  
Street:

Dimensions of  
Proposed Opening(s) in \_\_\_\_\_ (length) \_\_\_\_\_ (width) \_\_\_\_\_ (depth)  
Shoulder:

Escrow Fee Required: \$\_\_\_\_\_ (Resolution 2015-05)

Description and Purpose of Work: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
Applicant Signature

\_\_\_\_\_  
Date