



42 SHORE DRIVE  
HIGHLANDS, NJ 07732  
P: 732-872-1224 X 250  
F: 732-872-0670

Borough of Highlands  
APPLICATION FOR STREET EXCAVATION PERMIT

Permit Fee \$190 / Deposit \$500

**\*MUST BE 2 SEPARATE CHECKS\***

**SECTION A: TO BE COMPLETED BY APPLICANT**

Applicant's Name \_\_\_\_\_ Telephone # \_\_\_\_\_

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

Contractor: \_\_\_\_\_  
\*If other than applicant\*

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

Location of excavation: \_\_\_\_\_

Show location on sketch below – road names, distances, etc. If space is not sufficient, attach detailed drawing

Nature, purpose, and extent of excavation work:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

For trenches only: Length: \_\_\_\_\_ FT Width: \_\_\_\_\_ FT Depth: \_\_\_\_\_ FT

Are street Closures or traffic rerouting required? ( ) Yes ( ) No

(if yes, attach sketch and description of proposed traffic control devices)

Proposed date of commencement: \_\_\_\_\_ Proposed completion: \_\_\_\_\_

Statement: The undersigned applicant for a street excavation permit hereby warrants that the information herein is correct and that he is familiar with, and agrees to abide by the requirement of the "Street Excavation Ordinance" if the Borough of Highlands.

Insurance Company: \_\_\_\_\_ Policy Number: \_\_\_\_\_

Insurance Cert: \_\_\_\_\_ Expiration Date: \_\_\_\_\_

NOTE: APPLICANT SHALL NOTIFY THE PUBLIC WORKS DEPARTMENT AT 732-872-1224 EXT 250 PRIOR TO COMMENCEMENT OF WORK.



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**SECTION B: TO BE COMPLETED BY PUBLIC WORKS SUPERINTENDENT\***

\*Or Borough Engineer if applicable

Estimated excavation size: \_\_\_\_\_

Deposit amount required: \$ \_\_\_\_\_ Permit Fee \$ \_\_\_\_\_

Surety Bond Recommendation:

Required? ☐ Yes ☐ No

\_\_\_\_\_

\_\_\_\_\_

Provisions (if any):

\_\_\_\_\_

\_\_\_\_\_

Approval: ( ) Yes ( ) No

Disapproval Reason:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Public Works Superintendent Signature

Date

**SECTION C: TO BE COMPLETED BY POLICE CHIEF\***

**\*WHEN STREET CLOSURES OR TRAFFIC REROUTING IS PROPOSED\***

Approved: ( ) Yes ( ) No

Conditions of Approval (if any) :

\_\_\_\_\_

\_\_\_\_\_

Reason for disapproval:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Police Chief Signature

Date



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**Section D: TO BE COMPLETED BY CASHIER**

Permit Fee:

Amount Paid: \_\_\_\_\_ Date received: \_\_\_\_\_

Surety Bond:

Amount Paid: \_\_\_\_\_ Date received: \_\_\_\_\_

Deposit:

Amount Paid: \_\_\_\_\_ Date received: \_\_\_\_\_

\_\_\_\_\_  
Cashier Signature

\_\_\_\_\_  
Date

**Section E: TO BE COMPLETED BY BOROUGH CLERK \*IF APPLICABLE\***

Surety Bond # \_\_\_\_\_ Date Received: \_\_\_\_\_

\_\_\_\_\_  
Clerk Signature

\_\_\_\_\_  
Date

**Section F: TO BE COMPLETED BY THE BOROUGH ADMINISTRATOR**

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

**Section G: TO BE COMPLETED UPON COMPLETION OF WORK\***

\*To be completed by the DPW Superintendent\*

Date work finished: \_\_\_\_\_

Date of inspection: \_\_\_\_\_

Approval: ( ) Yes ( ) No

Authorized to release deposit ( ) Yes ( ) No

Authorized to release bond ( ) Yes ( ) No

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

**Section H: TO BE COMPLETED BY BOROUGH CLERK UPON COMPLETION**

Bond released: ☐ Yes ☐ No

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date



# Highlands Borough Department of Public Works

42 Shore Drive – Highlands – NJ – 07732  
732-872-1224 x250

## **Important Notice Regarding Repair Deposits/Guarantees**

The inspections listed below must be successfully completed in the order shown to fulfill your permit application requirements and initiate the counting of time toward refund of your repair deposit:

### **\*NOTE\***

#### **APPLICANT MUST CALL TO SCHEDULE ALL INSPECTIONS.**

1. All forms and expansion joints shall be inspected prior to pouring concrete sidewalks and curbs. Road openings shall be inspected for proper asphalt repair dimensions, neat and square edges, and properly compacted subgrade of a suitable material prior to the placement of any asphalt.
2. Final inspection of concrete sidewalks and curbs shall occur after all forms are completely removed and all restoration work is complete. Proper finish and color per permit are required. Final inspection of road openings shall occur after final paving is complete, any special repair conditions are met, and all surrounding areas have been restored and are free of debris and loose material.

### **\*NOTE\***

**Please allow ample time for inspections by DPW between the hours of 7:00 am and 3:30 pm Monday thru Friday, holidays excepted.**

Repair deposits are refundable six months after work is completed. Guarantees are refundable after three years. All refunds are contingent upon successful performance of the completed construction and restoration work. Both refund dates are determined from date of successful final inspection.

Please schedule all inspections in accordance with this Notice.

You may contact DPW offices at 732-872-1224 Ext.250 between 8:00 am and 3:00 pm Monday thru Friday to schedule inspections. Should you need any help with your permit, please contact us prior to submitting the application.

Thank you.