

**TOWN OF PELHAM
APPLICATION FOR PERMIT TO MAKE CUT IN HIGHWAY**

<i>Applicant</i>	<i>Address</i>	<i>Phone</i>
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<i>Contracted by</i>	<i>Address</i>	<i>Phone</i>
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Location (street, number)

Brief description of proposed work:

<i>Depth of Cut Needed</i>	<i>Width of Cut Needed</i>
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Brief description of how you intend to restore road cut:

Signature of Applicant

Superintendent's Use:

Date Received _____

Application Approved: ☐ Yes ☐ No Remarks: _____

TOWN OF PELHAM SUPERINTEDENT OF DEPARTMENT OF PUBLIC WORKS

This is to certify that the Highway Cut made by _____

at _____ has been restored in

as good condition as before entry in a timely manner.

Superintendent of Public Works

PERMIT TO CUT HIGHWAY

Permission is granted to _____ to make a
Highway Cut at _____ .

Superintendent of Public Works