



TOWN OF ELLINGTON

55 MAIN STREET - PO BOX 187
ELLINGTON, CONNECTICUT 06029-0187

www.ellington-ct.gov

Fee
\$35

APPLICATION / PERMIT FOR ALTERATIONS WITHIN THE ELLINGTON PUBLIC RIGHT-OF-WAY

Permit #

| | | | |
|---------------------|---------------------------------------------------------------------------------------------|--------------|--|
| Location of Job: | | | |
| Contractor Name: | | License #: | |
| Contractor Address: | Street: | Telephone #: | |
| | Town/State/Zip: | | |
| Insurance Carrier: | | Policy #: | |
| | Certificate of Insurance Attached? <input type="checkbox"/> Yes <input type="checkbox"/> No | | |

| | | | | | | |
|-----------------------------------|---------------------------------------------|--------------------------------------------------|---------------------------------------------|---------------------------------------------------------|-------------------------------------|------------------------------------------|
| Scope of Project in Right-of-Way: | <input type="checkbox"/> Roadway Excavation | <input type="checkbox"/> Alter Existing Drainage | <input type="checkbox"/> New Driveway Apron | <input type="checkbox"/> New Curb Cut Existing Location | <input type="checkbox"/> Irrigation | <input type="checkbox"/> Invisible Fence |
| | <input type="checkbox"/> Other: | | | | | |

| | |
|----------------------|--|
| Description of Work: | |
| | |
| | |

The Town of Ellington requires 24 hour notice in order to properly schedule visits before work is started and when required inspections are due. It is the responsibility of Contractor to inform the Department of Public Works (860.870.3140) when an inspection is needed.

All work to be completed and/or restored to the Standards of the Town of Ellington before the Bond is released.

| | |
|-----------------------|-------|
| Contractor Signature: | Date: |
|-----------------------|-------|

For Office Use Only

| | |
|-----------------------------------------------------------------------------------|---------------------------|
| Bond on file with Town: <input type="checkbox"/> Yes <input type="checkbox"/> No | CALL BEFORE YOU DIG #: |
| Permit fee paid: <input type="checkbox"/> Yes <input type="checkbox"/> No | Start date requested: |
| Plan for work submitted: <input type="checkbox"/> Yes <input type="checkbox"/> No | Expected completion date: |

Application and plans have been reviewed:

_____ Date _____ Approved Denied
Director of Public Works

_____ Date _____ Approved Denied
First Selectman