

STREET OPENING PERMIT APPLICATION

Borough of Woodbury Heights
500 Elm Avenue, Woodbury Heights, NJ 08097
856-848-2832

NAME: _____

ADDRESS: _____

CONTACT NAME: _____

PHONE NO. _____

LOCATION OF OPENING STREET		
BLOCK	LOT	
BETWEEN	AND	
NUMBER AND SIZE OF OPENINGS	TYPE OF PAVEMENT	
REASON FOR OPENING (CHECK APPROPRIATE ITEMS)		
<input type="checkbox"/> INSTALL/REPAIR GAS MAIN OR SERVICE	<input type="checkbox"/> SANITARY SEWER / WATER SERVICE CONNECTIONS	
<input type="checkbox"/> INSTALL/REPAIR ELECTRIC SERVICE	<input type="checkbox"/> OTHER	
DATE WORK TO BE STARTED:	DATE WORK TO BE COMPLETED	
DRAWING OF LOCATION		
RETURN PERMIT(S) TO: (NAME, COMPANY NAME, ADDRESS)		
DATE OF APPLICATION:	APPROVAL:	PERMIT NUMBER:

NJ LAW (N.J.S.A. 48:2-73) REQUIRES PROOF THAT NJ ONE-CALL (1-800-272-1000) HAS BEEN NOTIFIED PRIOR TO ISSUING A PERMIT

PLEASE ENTER THE CONFIRMATION NUMBER ASSIGNED _____