



Date Recvd.	_____
Permit Number	_____
Comments	_____

**Municipality of Murrysville**  
**4100 Sardis Road, Murrysville PA 15668**

Phone: 724-327-2100 Fax: 724-327-2881  
 Website: www.murrysville.com

**APPLICATION FOR ROAD OCCUPANCY PERMIT**  
**ORDINANCE NUMBER 96-74**

Date of Application \_\_\_\_\_

Application is hereby made by \_\_\_\_\_

at (address and phone) \_\_\_\_\_ for permission to work

within the right-of-way of (street name and house number) \_\_\_\_\_.

*Following is a brief description of the work to be performed:*

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

Under and subject to all the conditions, restrictions and regulations prescribed by the Municipality and on the general provisions and specifications, a true copy whereof is attached and made a part hereof, with the same force and effect as if written or printed herein and under and subject to the special conditions, restrictions, and regulations hereinafter set forth. Effective September 5, 2001, all Road Occupancy Permits issued by the Municipality of Murrysville are made under, subject to and governed by the Commonwealth of Pennsylvania Department of transportation (PennDOT) Publication 408 (Specifications) and all applicable supplements, codes, titles and chapters, specifically Pennsylvania Code, Title 67, Chapter 459, Occupancy of Highways by Utilities. PennDOT Specifications and applicable publications can be obtained online at <http://www.pacode.com>.

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**DATA APPLICABLE TO THIS APPLICATION**

Date when work is to commence: \_\_\_\_\_ Date when work is to be completed: \_\_\_\_\_

Road surface is improved to a width of \_\_\_\_\_. Traveled roadway surface (will / will not) be open cut.

Distance from centerline of road to the proposed work area: \_\_\_\_\_ Area of opening: \_\_\_\_\_

Length of trench (if applicable) along roadway: \_\_\_\_\_. Depth of trench (if applicable) below road surface: \_\_\_\_\_.

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**TO BE COMPLETED BY THE MUNICIPALITY**

	Issuing Fee	Inspection Fee	Inspection Fee	Total Fee
Schedule Item Number				
Unit Fee				
Number of Units				
Subtotal Fee				

Permit Conditions \_\_\_\_\_

\_\_\_\_\_  
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