



**WORKING WITHIN TOWN RIGHT OF WAY**

**Customer & Premise Information (Required)**

Date: \_\_\_\_\_ Building Permit Number: \_\_\_\_\_  
Name: \_\_\_\_\_ Email: \_\_\_\_\_  
Phone Number: ( ) \_\_\_\_\_ Fax Number: ( ) \_\_\_\_\_  
Location/Address: \_\_\_\_\_  
Property Identification Number (PID): \_\_\_\_\_ Lot Number: \_\_\_\_\_  
Type of Premise:  Residential  Multi-Unit Res.  Industrial  Commercial  Institutional

Owner Signature: \_\_\_\_\_

**Contractor Information (Required)**

Name: \_\_\_\_\_ Email: \_\_\_\_\_  
Phone Number: ( ) \_\_\_\_\_ Fax Number: ( ) \_\_\_\_\_

Contractor Signature: \_\_\_\_\_

**Proposed Work**

Check or complete all that apply:

Service Connection Type:  New  Renewal  Seasonal  
Service Connection System:  Water  Sanitary  
Service Connection Location:  Residential  Commercial  
Number of hours of work: \_\_\_\_\_  
Obtain Street Closure Permit from Police:  Yes  No  
Central Services form completed (if so, please attach):  Yes  No  
Backflow Prevention Device:  Yes  No  Don't Know  
Natural Gas Clearance:  Yes  No  
Type of existing road surface:  Asphalt  Concrete  Gravel Other \_\_\_\_\_

**For Office Use Only**

Permit Approved:  Yes  No  
Permit Valid until: \_\_\_\_\_  
Date Approved: \_\_\_\_\_  
Signature of Manger \_\_\_\_\_

**48 HRS NOTICE MUST BE GIVEN TO THE ENGINEERING DEPARTMENT BEFORE ANY WORK IS PERFORMED**

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**Contractor Certifications (Current document must be on file in the Engineering Dept)**

- |                                       |                              |                             |
|---------------------------------------|------------------------------|-----------------------------|
| WCB Certification:                    | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Natural Gas Awareness Training:       | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| NS Construction Safety Certification: | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Valid Excavation and Trenching Cert:  | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| TCP/TWS Certificate:                  | <input type="checkbox"/> Yes | <input type="checkbox"/> No |

**Contractor Requirements**

- |                                 |                              |                             |
|---------------------------------|------------------------------|-----------------------------|
| Minimum \$2,000,000 Insurance:  | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Machine capable of doing job:   | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Hazard Assessment prior to job: | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Proper compaction equipment:    | <input type="checkbox"/> Yes | <input type="checkbox"/> No |

**Contractor's Responsibilities**

For combined sewer and water projects, the Contractor is responsible for excavation to the water main. The Town will provide bedding gravels.

The Contractor is responsible for the following:

- Traffic Control
- Location and Clearance Report for Utilities
- Cutting of Asphalt and concrete surfaces
- Issuing of Notice to Neighboring residents and businesses if warranted
- Supply and Installation of all sanitary and storm sewer materials to sewer main regardless of property line.
- Supply and Install all water line materials from building to property line.
- Supply and Installation of road gravels (18" type 2 and 12" type 1)

**Town's Responsibilities**

The Town is Responsible for the following:

- Reinstatement of Asphalt and Concrete surfaces for Residential work **ONLY**
- Connection of service to main lines
- Supply of gravel bedding material where both water and sewer are being renewed or for new construction
- The Town will provide a truck and driver to haul away material for water services for Residential **ONLY**.

**ALL WORK PERFORMED MUST MEET OR EXCEED THE NOVA SCOTIA OCCUPATION HEALTH & SAFETY ACT**



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**Application Sketch**

In the space provided below, indicate all physical characteristics on, below or within the property that may impact the installation of the service connection installation or repair.

- Location of building(s)
- Location of garage(s)
- Location of driveway(s)
- Location of retaining walls
- Location of existing water service connection & service box
- Location of existing wastewater service connection (indicate gravity or pumped)
- Proposed location of service connection(s) to building
- Location of underground gas, phone and electrical utilities
- Any other significant features

