

# Borough of West Pittston

555 Exeter Avenue, West Pittston, Pa 18643  
Ph: 570.655.7782 Fax: 570.602.8046

## PAVE CUT PERMIT APPLICATION

Date of Cut: \_\_\_\_\_

Utility / Contractor Name: \_\_\_\_\_

Utility / Contactor Address: \_\_\_\_\_

Contact Name: \_\_\_\_\_ Phone: (\_\_\_\_\_)\_\_\_\_\_-\_\_\_\_\_-\_\_\_\_\_- Fax: (\_\_\_\_\_)\_\_\_\_\_-\_\_\_\_\_-\_\_\_\_\_

Pave Cut Location: \_\_\_\_\_

Purpose of Cut: \_\_\_\_\_

Size of Cut: Width: \_\_\_\_\_ Length: \_\_\_\_\_ Square Feet: \_\_\_\_\_

\_\_\_\_\_ (Square Feet) X \$5.00 = \$\_\_\_\_\_ (\*Minimum charge \$75.00\*) + \$10.00 Processing fee

= **TOTAL AMOUNT DUE: \$** \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**PLEASE ATTACH SKETCH OR DIAGRAM SHOWING LOCATION AND MEASUREMENTS OF CUT.**

Date Received: \_\_\_\_\_

**OFFICE USE ONLY**

Application approved?  Yes  No By: \_\_\_\_\_ Date: \_\_\_\_\_

Fee Received \$ \_\_\_\_\_ Check # \_\_\_\_\_

Pave Cut #: \_\_\_\_\_ Signature: \_\_\_\_\_