

East Bridgewater

DPW/Fire Department 100 Willow Avenue East Bridgewater MA 02333 508-378-1620 508-378-2071 Fax 508-378-1632

Permit Number	
Date Issued	
Expiration Date	30 Days from date of approval

TRENCH PERMIT Pursuant to G.L. c. 82A §1 and 520 CMR 7.00 et seq.(as amended)

THIS PERMIT MUST BE FULLY COMPLETED PRIOR TO CONSIDERATION

Name of Applicant			Phone	Cell
Street Address			L. Company	
City/Town	MA	ZIP		
Name of Excavator (if different from applicant)		pplicant)	Phone	Cell
Street Address				·
City/Town	MA	ZIP	400000000000000000000000000000000000000	
Name of Owner(s) of Property			Phone	Cell
Street Address				
City/Town	MA	ZIP		
Other Contact	L	Permit Fee R	eceived No()	Yes ()
Description, location and purpose Please describe the exact location be laid in proposed trench (eg; p	n of the	oposed trench: proposed trench and its	purpose (include	e a description of what is (or is intended) to
Insurance Certificate #:				
Name and Contact Information of Insurer:				
Policy Expiration Date:				
Dig Safe #:				
Name of Competent Person (as defined by 520 CMR 7.02):				

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Massachusetts Hoisting License #	
License Grade:	Expiration Date:
BY SIGNING THIS FORM, THE APPLICANT, OWNER, A THAT THEY ARE FAMILIAR WITH, OR, BEFORE COMM WITH, ALL LAWS AND REGULATIONS APPLICABLE TO G.L. c. 82A, 520 CMR 7.00 et seq., AND ANY APPI REGULATIONS AND THEY COVENANT AND AGREE THE SUCH WORK WILL COMPLY THEREWITH IN ALL R BELOW.	IENCEMENT OF THE WORK, WILL BECOME FAMILIAR O WORK PROPOSED, INCLUDING OSHA REGULATIONS, LICABLE MUNICIPAL ORDINANCES, BY-LAWS AND AT ALL WORK DONE UNDER THE PERMIT ISSUED FOR
THE UNDERSIGNED OWNER AUTHORIZES THE AP EXCAVATOR TO UNDERTAKE SUCH WORK ON THE DURATION OF CONSTRUCTION, AUTHORIZES PERSOENTER UPON THE PROPERTY TO MONITOR AND INCONDITIONS ATTACHED HERETO AND THE LAWS AND	C PROPERTY OF THE OWNER, AND ALSO, FOR THE ONS DULY APPOINTED BY THE MUNICIPALITY TO NSPECT THE WORK FOR CONFORMITY WITH THE
THE UNDERSIGNED APPLICANT, OWNER AND EXCAVAREIMBURSE THE MUNICIPALITY FOR ANY AND ALL COMUNICIPALITY IN CONNECTION WITH THIS PERMIT AS INCLUDING BUT NOT LIMITED TO ENFORCING THE RESTHIS PERMIT, INSPECTIONS MADE TO ASSURE COMPLIMUNICIPALITY TO PROTECT THE PUBLIC WHERE THE COMPLY THEREWITH INCLUDING POLICE DETAILS AND NECESSARY BY THE MUNICIPALITY.	OSTS AND EXPENSES INCURRED BY THE ND THE WORK CONDUCTED THEREUNDER, EQUIREMENTS OF STATE LAW AND CONDITIONS OF IANCE THEREWITH, AND MEASURES TAKEN BY THE E APPLICANT OWNER OR EXCAVATOR HAS FAILED TO
THE UNDERSIGNED APPLICANT, OWNER AND EXCAVAINDEMNIFY, AND HOLD HARMLESS THE MUNICIPALITANY AND ALL LIABILITY, CAUSES OR ACTION, COSTS, OF ANY INJURY, DEATH, LOSS, OR DAMAGE TO ACONDUCTED UNDER THIS PERMIT.	TY AND ALL OF ITS AGENTS AND EMPLOYEES FROM , AND EXPENSES RESULTING FROM OR ARISING OUT
APPLICANT SIGNATURE	
DATE	
EXCAVATOR SIGNATURE (IF DIFFERENT)	
DATE	
OWNER'S SIGNATURE (IF DIFFERENT)	
DATE:	
For City/Town use Do r	
PERMIT APPROVED BY PERMITTING AUTHORITY Date	\$Application Fee
CONDITIONS OF APPROVAL	·