

CITY OF CLEVELAND
DEPARTMENT OF PUBLIC WORKS
474 2nd Street SE, Cleveland, TN 37311
Phone # 472-2851 FAX # 559-9789

STREET CUT APPLICATION AND PERMIT

Application Number _____ Date _____

Utilities Name _____

Billing Address _____ FAX _____

City _____ State _____ Zip _____ Phone _____

_____ Electric _____ Water _____ Gas _____ Telephone _____ Other

_____ Regular Sewer (Less than 4 ft Deep)

_____ Deep Depth Sewer (More than 4 ft Deep)

(If Deep Depth, Estimate Depth of Line _____)

Excavation Location _____

Between _____ and _____ In Front of House # _____

Estimate Measurements:

Length _____ Width _____ No. of Cuts _____

Length _____ Width _____

Length _____ Width _____

Proposed Excavation Date _____ Estimated Completion Date _____

Applicant's Signature

FEES AND BOND INFORMATION

\$ 265.00 Standard Excavation Fee

\$ _____ Additional Fee (for larger than 48 sq. ft. @ \$3.00 per sq. ft./calculated by the Public Works Director at job completion)

\$ _____ * If Unpaved Street: \$ 500.00 Bond Required REFUND: Date: _____

\$ _____ * If Paved Street: \$ 1,000.00 Bond Required

\$ _____ Total Application Fee and Bond Amount \$ _____

* Bond will be refunded (less any additional fee) if work is performed to City standards.

Received By _____

Clerk Receipt Number _____

AUTHORIZED PERMIT APPROVAL

Approval Date _____ 20_____

Notation: _____

Director, Department of Public Works
