

THE CITY OF NORTH WILDWOOD

901 Atlantic Avenue, North Wildwood, New Jersey 08260

IN ACCORDANCE WITH SECTION 382-13 through 382-19 OF THE CODE OF THE CITY OF NORTH WILDWOOD
THE UNDERSIGNED HEREBY MAKES APPLICATION FOR A STREET OPENING PERMIT:

Date _____ Telephone Number _____

Applicant (print) _____

Address _____

Signature _____

EMERGENCY CONTACT INFORMATION

Firm/Individual Responsible for Completing Work _____

Address _____

Telephone Number _____ Emergency Contact Number _____

THIS STREET OPENING PERMIT MUST BE MAINTAINED AT THE JOB SITE

*Upon both start and completion of work, please notify North Wildwood Police Department (609-522-2411)
North Wildwood Public Works Department (609-522-4646) and, the City Engineer (609-465-2600)*

NOTE: THIS PERMIT WILL BE VALID FOR THIRTY (30) DAYS FROM DATE OF ISSUANCE

It is the responsibility of the contractor to provide road-closed signs, cones and/or barricades

Proof of Insurance (Insurance certificate, showing adequate limit of coverage and naming the City of North Wildwood and the City Engineer as additional insured's); **Detailed Estimate of Construction Costs;**
Performance Surety (In the penal sum of one hundred (100%) percent of the total estimated construction cost);
and, **Maintenance Surety** (In the penal sum of fifteen (15%) percent of the performance surety,
All must be attached to this application.

Street Opening Address _____ Block & Lot _____

Location of Opening (Street Name) _____ # of feet _____

Direction from centerline _____ Intersecting street _____

Size of opening (length) _____ (width) _____ (sq.ft. total) _____

Existing Surface Type _____ Purpose of Opening _____

Start Date _____ Completion Date _____

////////////////////////////////////// FOR CITY USE ONLY //

City Engineer _____ Chief of Police _____ City Clerk _____

NO WORK MAY COMMENCE WITHOUT ALL PRIOR APPROVALS