



TOWN OF RAYMOND, NEW HAMPSHIRE
 DEPARTMENT OF PUBLIC WORKS
 603-895-7036

STREET OPENING PERMIT

PERMIT NUMBER: _____

DATE: _____

PURSUANT TO THE TOWN OF RAYMOND, NEW HAMPSHIRE REGULATIONS, PERMISSION IS REQUESTED TO OCCUPY THE TOWN RIGHT OF WAY, TO DISTURB THE SURFACE, SHOULDERS, DITCH LINES, SIDEWALKS AND / OR ADJACENT SLOPES OF:

FOR THE PURPOSE OF:

I / WE, HEREBY AGREE TO CONFORM TO THE FOLLOWING INSTRUCTIONS, STANDARD CONDITIONS AND ALL FEDERAL, STATE AND LOCAL REGULATIONS PERTINENT TO THE EXECUTION OF REQUESTED SCOPE OF WORK.

I / WE, ALSO AGREE TO ANY ADDITIONAL INSTRUCTIONS AND / OR SPECIAL CONDITIONS ISSUED BY THE DIRECTOR OF PUBLIC WORKS OR HIS / HER AUTHORIZED REPRESENTATIVE(S) IN THIS PERMIT OR DURING THE PROGRESSION OF THE WORK.

I / WE, THE CONTRACTOR AND ANY SUB-CONTRACTORS, AGREE TO SAVE HARMLESS THE TOWN OF RAYMOND, NEW HAMPSHIRE FROM ANY AND ALL CLAIMS ARISING FROM THIS PERMITTING PROCESS AND / OR THE PROPOSED CONSTRUCTION.

I / WE, THE PROJECT OWNER, AGREE TO SAVE HARMLESS THE TOWN OF RAYMOND, NEW HAMPSHIRE FROM ANY AND ALL CLAIMS ARISING FROM THE CONSTRUCTION, MAINTENANCE AND OPERATION OF THE ITEMS STATED IN THIS PERMIT. IT IS UNDERSTOOD AND AGREED THAT THIS PERMIT IS FOR THE RIGHT OF WAY CONSTRUCTION, OCCUPANCY AND OPERATION OF ITEMS STATED IN THIS PERMIT AND IS BY SUFFERANCE ONLY, WITH THE TOWN RESERVING THE RIGHT TO REQUIRE, IN THE EVENT OF FUTURE ALTERATIONS OF THE HIGHWAY, OR HIGHWAY RIGHT OF WAYS, CERTAIN ALTERATIONS, RELOCATIONS OR COMPLETE REMOVAL OF ITEMS STATED IN THIS PERMIT AND I / WE THE OWNERS AGREE TO PERFORM SUCH WORK PROMPTLY AT OUR OWN EXPENSE. ALSO, I / WE HEREBY AGREE TO ASSUME SUCH ADDITIONAL COSTS AS THE TOWN MAY INCUR, BY REASON OF MY / OUR FAILURE TO PERFORM THIS WORK IN A MANNER PRESCRIBED ABOVE AND ANY PENALTIES IMPOSED BY THE TOWN OF RAYMOND REGULATIONS.

CONTRACTOR: _____ Date: _____

Office Phone Number _____ Mobile Phone Number _____

OWNER: _____ Date: _____

Office Phone Number _____ Mobile Phone Number _____

APPROVED
 DENIED

DIRECTOR OF PUBLIC WORKS: _____ Date: _____