



P.O. Box 70, 263 Main Street
Odessa, Ontario
K0H 2H0

EXCAVATION PERMIT

PERMIT NO. _____

ISSUED TO _____

DATE _____

Acting on Behalf of _____

APPROVED BY
C.T.Co. B.T.Co. Gas Co. Twp. Other

Subject to the Following Requirements

DETAILS OF PROJECT

Cut Location _____

Description of Work _____

Plan of Work (see reverse) *or* Plan Attached

	Amount Required	Proof of or Cheque Req'd.	Refundable	Total
Permit Fees				

Performance Bond _____

TOTAL PAID \$25.00 Application \$1000.00 Deposit

Insurance _____

Connection Charges: *FEES TO BE COLLECTED WITH BUILDING PERMIT APPLICATION*

Inspection Charges: *ACTUAL COSTS WILL BE INVOICED UPON COMPLETION OF PERMIT*

Traffic Plan _____

APPROVED _____ DATE _____

Date Open _____ Date Closed _____

Date Backfilling Approved _____ Date Reinstatement Completed _____

BOND RELEASE APPROVED _____ DATE _____

Refund to be forwarded to Contractor, or Additional amount to be paid by Contractor

*ALL WORK TO BE IN ACCORDANCE WITH TOWNSHIP BYLAWS AND STANDARDS.