ELIZABETHTOWN BOROUGH CURB AND SIDEWALK PERMIT APPLICATION

1. GENE	RAL INFORM	ATION:			
Location	Street Address	of Project):			
Property Owner's Name:					
Contracto	or's Phone Num	ber (if different fron	n above):		
Contracto	r's Email Addr	ess (if different from	above):		
2. PROP	OSED PROJEC	CT:			
Si	dewalk	Curb		Sidewalk and Curb	
3. INSPE	CTIONS:				
stages have	e been approved	prior to proceeding to ractor to schedule insp	the next phas	permit. Please insure that a se of the project. It is the re the Borough at least 24 hou	sponsibility of
	ne and Grade:		formed:	•	
	orms and Concr		formed:		
	acktop Restorate nal Inspection:		formed: formed:	•	
				,	
		not exceed in scope beyond ion for a zoning permit v		escribed above. Should the so h.	cope of the project
Signature of Property Owner/Agent/Contractor				Date	
FOR OFFICIA	AL USE ONLY				
Received 1	by Date	Issued by	Date	Final Inspection	Date