

**Application for Cut Permit**

**Road Cut**  **Sidewalk Cut**

1. Property Owner Name: \_\_\_\_\_  
Mailing Address: \_\_\_\_\_  
Phone Number: \_\_\_\_\_  
Roll Number: \_\_\_\_\_
2. Contractor Name: \_\_\_\_\_  
Phone Number: \_\_\_\_\_
3. The undersigned hereby applies for a permit on (road name) \_\_\_\_\_  
in front of the premises described as: Lot \_\_\_\_\_ Plan or Concession \_\_\_\_\_
4. 911 Address \_\_\_\_\_
5. Detail of Proposal:
  - a) Drainage      Water Line      Sewer Line      Other \_\_\_\_\_
  - b) Method of Compaction: \_\_\_\_\_
  - c) Fill/Bedding/Surface Material: \_\_\_\_\_
  - d) Features (retaining wall, curb, etc.) \_\_\_\_\_
6. Proposed Completion Date: \_\_\_\_\_
7. Location Sketch: Include all dimensions, proximity to existing and proposed buildings, driveways, roads, boulevards, etc.
  
8. The contractor, applicant, owner or any agent thereof is responsible for arranging and ensuring completion of all locates (including but not being limited to gas, hydro, phone, sewer, water, cable TV, etc). No work is to begin without proper clearance from each agency. The Town assumes no liability or responsibility for clearance of utilities, lines, etc. or any damage thereto.

9. A mandatory deposit is required in conjunction with all road cut and sidewalk cut permit applications. The deposit must be in the form of a certified cheque made payable to the Town of South Bruce Peninsula. Said deposit will be held by the Town until the specified expiry date of this permit. At that time, the applicant, contractor, owner or any agent thereof forfeits the deposit if it is determined by the Town that the roadway, sidewalk or any portion thereof have not been replaced or repaired to the same or better standards than prior to any commencement of works. The Town reserves the right to use all or any portion of the deposit cheque for the repair and/or replacement of the roadway, sidewalk or any portion thereof. If it is deemed by the Town that the works have been completed to a standard satisfactory to the Town, the deposit cheque will be returned to the applicant/owner.

10. Fee Schedule

Permit Application Fee	\$165.00
Additional Inspection Fee (as required)	\$40.00
Refundable Deposit (Certified Cheque) for Curb/Sidewalk Cut	\$500.00
Refundable Deposit (Certified Cheque) for Road Cut	\$1000.00

The application for a cut permit must be accompanied by the associated application fee and certified deposit cheque in order for the application to be processed. Processing of the permit includes one site inspection performed by Town officials prior to the works being performed and one inspection performed upon completion of the work.

The proposed location must be clearly marked prior to the submission of the application to the Town. All proposals of work must meet with the approval of the Town. Additional inspections may be required and are subject to the applicable fee.

It is understood that all works will be constructed, altered, maintained or operated at the expense of the undersigned and/or the owner and that work must not begin before a permit has been issued by the Town. The issue of a permit by the Town does not relieve the contractor(s), the owner(s), the applicant(s), their heirs, executors, administrators, successors and assigns from any liability and further, the contractor(s), the owner(s), the applicant(s), their heirs, executors, administrators, successors and assigns hereby agree to observe, keep, perform and be subject to the regulations and conditions of the said permit and to indemnify and save harmless the Town of South Bruce Peninsula from and against all loss, cost, charges, damages, expenses, claims and demands whatsoever for which the Town of South Bruce Peninsula may be liable by reason of anything done or omitted to be done in the construction, maintenance, alteration, or operation of the works authorized.

Date: \_\_\_\_\_ Signature: \_\_\_\_\_

**Office Use Only** **Permit Number** \_\_\_\_\_

**Fee Received** \_\_\_\_\_ **Deposit Received** \_\_\_\_\_

Status of Permit:  Approved  Denied Permit Expiry Date: \_\_\_\_\_

**A) Initial Inspection Date:** \_\_\_\_\_ **Town Signature:** \_\_\_\_\_

Comments: \_\_\_\_\_

**B) Post Construction Inspection Date:** \_\_\_\_\_ **Town Signature:** \_\_\_\_\_

Comments: \_\_\_\_\_

Deposit Return: Yes  No  Date: \_\_\_\_\_