City of Easton
Bureau of Engineering

APPLICATION
FOR SIDEWALK/CURB IMPROVEMENTS PERMIT

Location _____

	OWNER	CONTRACTOR
Name	_____	_____
Address	_____	_____
	_____	_____
Phone	_____	_____
Contact	_____	_____

Curb/Sidewalk _____ Feet

____ New Curb ____ Curb Replacement ____ Curb Repair

____ New Sidewalk ____ Sidewalk Replacement ____ Sidewalk Repair

____ Handicapped Access Ramp _____ (number)

____ Driveway Cross-over _____ (number)

Submittals

____ Driveway/Cross-over Sketch ____ Insurance Verification form

____ PennDOT Occupancy Permit (on state roads)

Date _____ Signature _____