CITY OF Beachwood
25325 Fairmount Blvd. • Beachwood, Ohio 44122
Phone (216)292-1914 • Fax (216)292-1917
Email: Building@beachwoodohio.com

STREET OPENING PERMIT APPPLICATION

PERMIT No.: _____ DATE ISSUED _____

PERMIT FEE: $_____

****

Location: _____

Kind of Paving: _____

Purpose: _____

Number of Openings in Tree Lawn Area: _____

Number of Openings in a Street Area (including borings): _____

When: Date(s): _____

Time(s) _____

****

Applicant Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Telephone No.: _____ Fax Number: _____

Signature of Applicant: _____

Print Name: _____

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The acceptance of the permit shall constitute an agreement of the part of the applicant to abide by all the conditions herein contained and to comply with the ordinances of the City of Beachwood, the rules and regulations prescribed by the Public Works Director and the laws of Ohio relating to the work to be done hereunder; and said agreement is a condition of said permit. It is a further condition of this permit that the Public Works Department of the City of Beachwood must be notified 48 hours before the completion of work requiring inspection by the Code of the City (216-292-1922).

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Date _____, 20____, I hereby certify that I have examined thy application for a street opening permit and approve the above application for a street opening permit.

Public Works Director and/or City Engineer _____

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Office Use

Tree Lawn Excavation(s)	_____	x	$500.00	=	$_____
Street Excavation(s)	_____	x	$1000.00	=	$_____
Total Fee Required:					$_____

COMMENTS: