## **CITY OF SHAMOKIN**

## PERMIT APPLICATION – STREET EXCAVATIONS

ACCT. NO.	W.O.#	SERVICE NO.	SIZE	LENGTH
DATE:	APPLICANT:			
DATE. AFFLICANT.				
LOCATION OF EXCAVATION:			SIZE OF OPENING:	
			TYPE OF BASE:	
PURPOSE: REPAIR - REPLACE - NEW - RETIRE			PA ONE-CALL SERIAL NO.:	
STREET LOCATION & WORK LAYOUT				
¥.	ē		r .	¥
		21	N <del>·</del>	
		100		
				3
<del></del>				
		I		
ESTIMATED DATE	OF RESTORATION	SIGNAT	URE	