

**MUNICIPALITY OF NORRISTOWN
PUBLIC WORKS**

235 East Airy Street
Norristown, PA 19401
610-270-0437
610-279-3603 (fax)

PERMIT FEE SCHEDULE

Expiration

SURFACE OPENING OF STREET & SIDEWALK

3 months

Conduit	\$150
Electric Conduit	\$150
Gas Lines	\$150
Plumbers - sanitary & water	\$150
Water Lines	\$150

(Note: Street Opening - \$5000 surety bond required per Ord. 08-04. Utility Co.'s \$3000)

Test Holes	\$50 application fee, \$10 each hole	1 month
Utility Poles	\$50 application fee, \$5 each pole	1 month
Roadway Crossings	\$50 application fee, \$75 each day	
Setting Stormwater Appliance	\$75 per unit	
Concrete Sidewalk Work	\$50 for first 25 lineal feet or fraction thereof	1 month
	\$20 for each additional 25 lineal feet or fraction thereof	
Concrete Curb Work	\$40 for first 25 lineal feet or fraction thereof	1 month
	\$20 for each additional 25 lineal feet or fraction thereof	
Dumpster	\$50 for first day, \$15 for each additional day	
Storing or Stockpiling Materials	\$60 for first day, \$50 for each additional day	
Protection Fence, Shed, Trailer	\$50 for each month or fraction thereof	1 month
	\$40 for each additional month	
Scaffolding	\$50 for each month or fraction thereof	1 month
	\$15 for each additional month	
Street Closing	\$100 for each day	
Oversize Load w/ Police Escort	\$100 for each day	

OTHER FEES

Temporary No Parking Sign	\$2 each
Highway Map	\$2.50 each
Recycling Container	\$15 for second one, first one is free

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HIGHWAY PERMIT APPLICATION

Permit # _____ Date _____

Applicant's Name _____

Address _____

Phone # _____ Cell # _____ Fax # _____

Property Owner's Name _____

Address _____

Phone # _____ Cell # _____ Fax # _____

Address of Proposed Work _____

(✓) Type of Permit

Scaffolding _____ Storing or Stockpiling Materials _____ Protection Fence _____ Shed _____
Supply Trailer _____ Utility Pole(s) _____ how many? _____ Test Hole(s) _____ how many? _____

Start Date _____ Completion Date _____

Permit Fee \$ _____

(Acct. 01.322.305900)

It is hereby stipulated and agreed that the above work shall be executed in strict conformity with the provisions of all existing Ordinances governing such work, and under the direction and subject to the approval of the Public Works Director.

The undersigned further agrees to indemnify and save harmless the Municipality of Norristown from any and all loss, expenses and damages in any manner sustained through or by reason of the issue of the said permit, or by the doing of work under it, or by negligence, imperfect work, acts of omissions of the aforesaid (person, firm or corporation), or his (or their) employees.

Applicant Signature

Approved

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SIDEWALK/CURB PERMIT APPLICATION

Permit # _____ Date _____

Applicant's Name _____

Address _____

Phone # _____ Cell # _____ Fax # _____

Property Owner's Name _____

Address _____

Phone # _____ Cell # _____ Fax # _____

Address of Proposed Work _____

Type of Permit

Sidewalk Repair _____ Sidewalk Replacement _____ Total Lineal Footage of Project _____

Curb Repair _____ Curb Replacement _____ Total Lineal Footage of Project _____

Start Date _____ Completion Date _____

Permit Fee \$ _____

(Acct. 01.322.305900)

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**TRANSPORT OVERSIZE/OVERWEIGHT LOAD
PERMIT APPLICATION**

Permit # _____ Date _____

Name of Applicant _____

Address _____

Phone # _____ Cell # _____ Fax # _____

Start Date _____ Time _____

Truck/Equipment _____ Size/Weight _____

Route _____

Permit Fee \$100.00

(Acct. 01.322.305900)

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**SURFACE OPENING OF STREET/SIDEWALK
PERMIT APPLICATION**

Permit # _____ Date _____

Applicant's Name _____ License # _____

Address _____

Phone # _____ Cell # _____ Fax # _____

Owner of Property _____

Address _____

Phone # _____ Cell # _____ Fax # _____

Address of Proposed Work _____

Type of Permit:
Street Opening _____ Purpose _____

Sidewalk Opening _____ Purpose _____

Start Date _____ Completion Date _____

Permit Fee \$150.00

(Acct. 01.322.305900)

All temporary and permanent patches in the street must consist of asphalt, no exceptions. All permanent patches must be completed within ten (10) working days of the installation of the temporary patch.

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STREET CLOSURE PERMIT APPLICATION

Permit # _____ Date _____

Contractor's Name _____ License # _____

Address _____

Phone # _____ Cell # _____ Fax # _____

Location of Street to be Closed _____

Date _____ Time _____ till _____

Reason _____

Permit Fee \$ _____

(Acct. 01.322.305900)

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DUMPSTER / STORAGE CONTAINER PERMIT APPLICATION

Permit # _____ Date _____

Applicant's Name _____

Address _____

Phone # _____ Cell # _____ Fax # _____

Owner of Property _____

Address _____

Phone # _____ Cell # _____ Fax # _____

Container Co. Name _____ Phone # _____

Address where container will be placed _____

Date of Drop Off _____ Date of Pick Up _____

(\$50.00 for first day, \$15.00 for each additional day)

Permit Fee \$ _____

(Acct. 01.322.305900)

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