



City of Elmira
 Department of Public Works
 Phone: (607) 737-5679
<http://www.cityofelmira.net>

840 Linden Place Ext.
 Elmira, NY 14901
 Fax: (607) 737-5753

Application for a Curb Cut Permit

Complete and return to DPW Administration Office
 at 840 Linden Place Ext. during office hours on
 Monday – Friday from 8:00am to 4:00pm.

Official Use Only
 Permit Number:

1. Today's Date:	8. Contractor Email Address:
2. Property Owner:	9. Address/Location of proposed curb cut:
3. Property Owner Address:	10. Length of proposed curb cut (in feet):
4. Property Owner Telephone:	11. Attach a sketch of the proposed work which shows the relationship of the curb cut to the street and property lines.
5. Contractor Name:	PLEASE NOTE: The City of Elmira reserves the right to deny a request. Some commercial applications may have to receive approval from the Traffic Coordinating Board. For Information on the Traffic Coordinating Board, see http://www.cityofelmira.net/boards
6. Contractor Address:	
7. Contractor Telephone:	
12. CONTRACTORS: I certify that I have filed with the Department of Public Works, City of Elmira, compliance with requirements of the <u>Worker's Compensation and Disability Benefits Law</u> and proper public liability insurance (with the City of Elmira named as an Additional Insured on a Primary Basis) for personal injury and property damage. The amount of coverage of the public liability insurance and proof of coverage is subject to the approval of the Corporation Counsel of the City of Elmira.*	
13. I acknowledge the receipt of the <u>Curb Cut Specifications and Standards</u> as given to me by the City of Elmira or available online at http://www.cityofelmira.net/permits and agree to comply with the requirements contained therein. I understand that the City of Elmira does NOT make the curb cut; it is <u>my responsibility as the Permittee</u> . A minimum of two (2) working days must be given to the City of Elmira Engineering Division at (607) 737-5750 for inspection and approval of the curb cut. Inspection will take place between 7:25am and 3:25pm, Monday through Friday on any regularly scheduled workday.	
14. Attached is [] cash or [] check# _____ for _____ as required by City Ordinance. Checks should be made payable to the <u>City of Elmira</u> in the exact amount of the fee. THIS FORM IS YOUR RECEIPT	

To the City Manager, City of Elmira,

I hereby request permission to complete the proposed work according to the details above and to any attached documentation and according to the Curb Cut Specifications and Standards.

 Contractor/Permittee Signature

This permit is issued pursuant to the Ordinance (which is included in the Curb Cut Specifications and Standards), and pursuant to applicant complying with all requirements of said Ordinance. This permit is valid for thirty (30) days from the date of approval, but sooner revoked or cancelled at the discretion of the City Manager or his authorized representative.

*The above applicant's insurance is still in effect.
 CC: Engineering, Inspection Services, file

 For the City Manager