



STATE OF CONNECTICUT
DEPARTMENT OF TRANSPORTATION
BUREAU OF HIGHWAY OPERATIONS AND
MAINTENANCE

Date:	PMT-1 Rev. 10/13 State of Connecticut Department of Transportation APPLICATION FOR PERMIT	Application form must be filled in completely and mailed or delivered to the corresponding District Office for the subject town.
Fee: (for DOT use)		

LOCATION OF PROPOSED WORK:

- (a) Town _____ (b) Route _____ (c) Street Name & No. _____
 (d) (Circle One) N. S. E. W. side of Highway (e) Located Between Utility Poles No. _____ & No. _____
 (f) Distance and direction from nearest intersecting road _____ Miles (N. S. E. W.) of _____ (St/Rd)

Application is hereby made to: (Describe fully & include sketch or attach plans) _____

PERMIT FEE can be paid only by check or money order payable to Treasurer- State of Conn.

<p>Name of Surety Company & amount of Bond _____</p> <p>Party whom Bond is issued: Print Name _____ Signed _____ Phone _____</p> <hr/> <p>Party to whom Insurance is issued: Print Name _____ Signed _____</p> <p>Approximate Time Required _____ Desired Starting Date _____</p> <p>Complete Plans and Specifications must be submitted for major encroachment permits. On other work a careful sketch shall be shown on space above or on back side of application.</p>	<p>Permit to be issued to: Name _____ & _____ Address _____ Town _____ ZIP _____</p> <hr/> <p>The owner of the property for whom this work is being performed agrees to accept all future maintenance responsibility for the work specified in the permit.</p> <p>Print Owner's Name _____ Address _____ Signed _____ Phone _____</p>
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