

**Borough of Castle Shannon**  
**3310 McRoberts Road**  
**Castle Shannon, PA 15234**  
**(412) 885-9200**  
**(412) 885-9251**

### **Application for Street Opening**

Applicant's Name and Address: \_\_\_\_\_

\_\_\_\_\_

Regular Phone: \_\_\_\_\_ Emergency Phone: \_\_\_\_\_

Type of Opening: Street/R.O.W. \_\_\_\_\_ Sidewalk \_\_\_\_\_ Pvt. Prop. \_\_\_\_\_ Public Prop \_\_\_\_\_

Actual Location of Opening/Address: \_\_\_\_\_

Size of Proposed Opening: \_\_\_\_\_

We will restore the area in accordance with current  
Municipal specifications. \_\_\_\_\_ Yes \_\_\_\_\_ No

If no indicate specific reason/s: \_\_\_\_\_

\_\_\_\_\_

Permit Fees: \$60.00 + \$.50 per foot for each foot over 50 feet \$ \_\_\_\_\_

Work will begin on: \_\_\_\_\_ PA "One Call" on: \_\_\_\_\_

We hereby agree to perform this work in accordance with the provisions of the Borough's Street Opening Ordinance. We will contact the Borough for the required inspections.

X \_\_\_\_\_

\_\_\_\_\_  
Print name here.

Date: \_\_\_\_\_ Approved for issuance \_\_\_\_\_

Zoning and Code Official

Copy of the Borough's Street opening ordinance and procedures are available upon request.