



# CITY OF MELROSE

562 Main Street  
Melrose, MA 02176  
Phone: 781-979-4172

Permit Number

Date Issued

Expiration Date

## SITE WORK/UTILITY MAINS PERMIT

*For trenches longer than 100 LF, soil exploration, or more than 1/2 acre land disturbance*

☐ Utilites

☐ Roadway

☐ Test Pit/Borings

☐ Other \_\_\_\_\_

**THIS PERMIT MUST BE FULLY COMPLETED PRIOR TO CONSIDERATION. SEE FEE SCHEDULE.**

Name of Applicant/Owner			Email:
Street Address			Phone/Cell:
City/Town	State	ZIP	
Name of Contractor (if different from applicant):			Email:
Street Address			Phone/Cell:
City/Town	State	ZIP	# Acres Disturbed:
Location of work (if different from Owner):			Trench dimensions (ft): Length Width Depth

Does this work include NEW water or sewer services?

Y N

How many of each?

Description, location and purpose of proposed work

Include sketch below or attach plans

Date(s) of proposed work:

Plans Dated:

### THE INFORMATION BELOW MUST BE PROVIDED

Name of Competent Person (as defined by 520 CMR 7.02):

MA HOISTING LICENSE # \_\_\_\_\_ MA CONTRACTOR LICENSE # \_\_\_\_\_

LICENSE GRADE \_\_\_\_\_

LICENSE EXPIRATION DATE \_\_\_\_\_

Insurance Certificate Attached ☐ YES ☐ NO

DIG SAFE # \_\_\_\_\_

**SIGN OFF FOR CITY OF MELROSE PUBLIC WORKS DEPARTMENT PERMIT Page 2 of 2**

BY SIGNING THIS FORM, THE APPLICANT, OWNER, AND EXCAVATOR ALL ACKNOWLEDGE AND CERTIFY THAT THEY ARE FAMILIAR WITH, OR, BEFORE COMMENCEMENT OF THE WORK, WILL BECOME FAMILIAR WITH, ALL LAWS AND REGULATIONS APPLICABLE TO THE WORK PROPOSED, INCLUDING OSHA REGULATIONS, G.L. c. 82A, 520 CMR 7.00 et seq., AND ANY APPLICABLE MUNICIPAL ORDINANCES, BY-LAWS AND REGULATIONS AND THEY COVENANT AND AGREE THAT ALL WORK DONE UNDER THE PERMIT ISSUED FOR SUCH WORK WILL COMPLY THEREWITH IN ALL RESPECTS AND WITH THE CONDITIONS SET FORTH.

THE UNDERSIGNED OWNER AUTHORIZES THE APPLICANT TO APPLY FOR THE PERMIT AND THE EXCAVATOR TO UNDERTAKE SUCH WORK ON THE PROPERTY OF THE OWNER, AND ALSO, FOR THE DURATION OF CONSTRUCTION, AUTHORIZES PERSONS DULY APPOINTED BY THE MUNICIPALITY TO ENTER UPON THE PROPERTY TO MONITOR AND INSPECT THE WORK FOR CONFORMITY WITH THE CONDITIONS ATTACHED HERETO AND THE LAWS AND REGULATIONS GOVERNING SUCH WORK.

THE UNDERSIGNED APPLICANT, OWNER AND EXCAVATOR AGREE JOINTLY AND SEVERALLY TO REIMBURSE THE MUNICIPALITY FOR ANY AND ALL COSTS AND EXPENSES INCURRED BY THE MUNICIPALITY IN CONNECTION WITH THIS PERMIT AND THE WORK CONDUCTED THEREUNDER, INCLUDING BUT NOT LIMITED TO ENFORCING THE REQUIREMENTS OF STATE LAW AND CONDITIONS OF THIS PERMIT, INSPECTIONS MADE TO ASSURE COMPLIANCE THEREWITH, AND MEASURES TAKEN BY THE MUNICIPALITY TO PROTECT THE PUBLIC WHERE THE APPLICANT OWNER OR EXCAVATOR HAS FAILED TO COMPLY THEREWITH, INCLUDING POLICE DETAILS AND OTHER REMEDIAL MEASURES DEEMED NECESSARY BY THE MUNICIPALITY.

THE UNDERSIGNED APPLICANT, OWNER AND EXCAVATOR AGREE JOINTLY AND SEVERALLY TO DEFEND, INDEMNIFY, AND HOLD HARMLESS THE MUNICIPALITY AND ALL OF ITS AGENTS AND EMPLOYEES FROM ANY AND ALL LIABILITY, CAUSES OR ACTION, COSTS, AND EXPENSES RESULTING FROM OR ARISING OUT OF ANY INJURY, DEATH, LOSS, OR DAMAGE TO ANY PERSON OR PROPERTY DURING THE WORK CONDUCTED UNDER THIS PERMIT.

**SPECIAL REQUIREMENTS**

- ALL WORK IS TO BE PERFORMED IN ACCORDANCE WITH CITY OF MELROSE ORDINANCES AND DPW DESIGN AND CONSTRUCTION STANDARDS
- TRENCH GUARANTEE REQUIRED FOR 1 YEAR FROM ACCEPTANCE OF COMPLETED WORK
- CONTRACTOR SHALL HANDLE AND DISPOSE OF ALL MATERIALS, INCLUDING HAZARDOUS MATERIALS, IN ACCORDNACE WITH FEDERAL, STATE, AND LOCAL LAWS
- ALL WATER SERVICE WORK REQUIRING SERVICE SHUT-OFF MUST BE SCHEDULED THROUGH THE WATER DIVISION **72 HOURS PRIOR** TO PERFORMING THE WORK (UNLESS EMERGENCY). CONTRACTORS SHALL NOT TOUCH VALVES OR HYDRANTS UNDER ANY CIRCUMSTANCES. CALL 781-979-4175 TO SCHEDULE.
- FOR GAS COMPANY PROJECTS, ATTACH WORK ORDER TO PERMIT

APPLICANT'S SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

CONTRACTOR'S SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

OWNER'S SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

**DO NOT WRITE BELOW THIS LINE - FOR CITY OF MELROSE DPW ONLY**

PERMIT ISSUED BY: Engineering Division

RESTORATION REQUIRED: \_\_\_\_\_

FEE CALCULATION: \_\_\_\_\_

FEE REC'D: \$ \_\_\_\_\_ BOND REC'D: \$ \_\_\_\_\_ INSURANCE REC'D: Y N

APPROVED BY: \_\_\_\_\_

DATE: \_\_\_\_\_

*City of Melrose Permitting Authority*