JACKSON TOWNSHIP, YORK COUNTY APPLICATION FOR TOWNSHIP ROAD RIGHT-OF-WAY OCCUPANCY PERMIT

plicant: Application Date		ion Date	
Address:	Phone: _	Phone:	
	Email: _		
requests permission to occupy the road right-o	of-way of	Road/Street/Drive/Lane:	
Description and Purpose of Work:			
Under and subject to all the conditions of Township Ordinances.	s and restrictions, prescribed by		
General Information:	Distance from center Distance of proposed e or tower ft. les: not) be opened. urface: sq. yds. d part: sq. yds. feet.	rface width =ft. line to road edge = line to road R-O-W line =ft.	
Schedule Item No.			
Unit Fee:			
Number of Units:			
Total Fee:			

The applicant is (an individual) (a partnership) (a corporation incorporated under the law of ______.

Name of Applicant (Please Print)