

I HEREBY APPLY TO ALTER THE CURB AS DESCRIBED BELOW:

Send to: Village of Sag Harbor P.O. Box 660 Sag Harbor, N.Y. 11963	You must contact the Superintendent of Public Works at (631) 725-0107 prior to the curb cut.
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Name of Applicant: <div style="display: flex; justify-content: space-between; font-size: small;"> <i>First</i> <i>Middle</i> <i>Last</i> </div>	Date of Application: <div style="text-align: center; font-size: small;"> <i>(mm / dd / yyyy)</i> </div>
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Name of Business Firm (if applicable):	Street Address:
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Name of Client Represented (if applicable): <div style="display: flex; justify-content: space-between; font-size: small;"> <i>First</i> <i>Middle</i> <i>Last</i> </div>	City/State/Zip:
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Address of Curb Cut:	Signature of Applicant:
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DESCRIPTION AND PURPOSE OF CURB CUT

_____ _____ _____ _____	<table style="width:100%; border-collapse: collapse;"> <tr> <td style="border-bottom: 1px solid black; font-size: x-small;">DISTRICT</td> <td style="border-bottom: 1px solid black; font-size: x-small;">SECTION</td> <td style="border-bottom: 1px solid black; font-size: x-small;">BLOCK</td> <td style="border-bottom: 1px solid black; font-size: x-small;">LOT</td> </tr> <tr> <td colspan="4" style="padding-top: 5px;">Date of curb cut: _____</td> </tr> <tr> <td colspan="4" style="padding-top: 5px;">Width of curbing To be removed: _____</td> </tr> </table>	DISTRICT	SECTION	BLOCK	LOT	Date of curb cut: _____				Width of curbing To be removed: _____			
DISTRICT	SECTION	BLOCK	LOT										
Date of curb cut: _____													
Width of curbing To be removed: _____													

GUARANTY AND CONDITIONS

A cash bond or certified check in the amount of five hundred dollars (\$500.) must be submitted with this application. Moneys shall be refunded upon successful inspection by the Superintendent of Public Works.

The applicant must furnish a certificate of liability insurance naming the Village of Sag Harbor as an additional insured in the minimum sum of one million dollars (\$1,000,000.) with this application.

The roadway may not be altered, nor any public right-of-way encumbered unless the appropriate permits have been issued.

STATUS OF REQUEST

Approved
 Denied
 Approved pursuant to the following conditions: _____

SIGNATURE:	TITLE:	DATE:	PERMIT No.
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