CITY OF FAIRFIELD, OHIO
APPLICATION FOR OPEN ROAD CUT

Date: _____

Application is hereby made for an open road cut permit as follows:

Location: _____
Address Lot No.

Type of construction: _____

Land owner's name: _____

Address: _____ Phone number: _____

_____ Zip Code: _____

Contractor's name: _____

Address: _____ Phone number: _____

_____ Zip Code: _____

Work to be done: _____

_____

Date(s) work to be done: _____

POSITION OF OPEN ROAD CUT TO BE SHOWN ON A PLOT PLAN

Is boring, tunneling or pushing possible: _____

Reason for open road cut rather than one of the above: _____

_____

Will traffic be maintained? _____

Length of time required to complete work: _____

I hereby agree to install flowable backfill full depth to the edge of the roadway and replace the pavement with the same type and thickness of material that was removed.

Signed: _____

Printed name: _____

Address: _____

Phone: _____

An inspection of any water or sewer work must be made. Call the Construction Services Division at 513-867-4200.

☐ Approved ☐ Disapproved

Signature: _____

Comments: _____

cc: ☐ Public Works Director ☐ Utilities Director ☐ Street Division
☐ City Manager ☐ City Engineer