# **Township of Hampton - Road Opening Permits**

Please take note that Road Opening Permits are required for any/all work which is to be performed in the Right-of-Way (R/W) including, for example:

#### **UTILITY WORK:**

- Sanitary Sewer Connections
- Water Lines (Distribution & Private)\*
- Gas Lines\*
- Electric Lines\*
- Communication Lines (Phone, Cable, etc.)\*
- Industrial Equipment

(i.e., Utility Poles, Fire Hydrants, Utility Cabinets, Manholes, Pumps, Confined Space Vaults, etc.)\*

#### **ROADWORK:**

- Curbing
- Asphalt Repairs
- Sidewalk Installations (Public)
- Storm Water Drainage System
- Regrading
- Tree Stump Removal

### **RESIDENTIAL/COMMERCIAL IMPROVMENTS:**

- Drainage (sump pump discharges, leaders, drywell overflows, etc.)
- Driveway Repairs &/or Upgrades
- Landscaping
  - o Sidewalk Installations (Private)
  - o Fences
  - o Retaining Walls (Wet Walls in R/W are NOT permitted)
  - Planting (Trees, bushes, shrubs)
- Sprinkler Systems
- Dog Fences
- Mail Boxes
- Lighting/Security Systems, etc.

## **MISCELLANEOUS:**

- Sign Installations
- Demolition
- Test Pits

### **NOTES:**

\*=May require Inspections from other entities

If you require any further information, please see the information listed below, or call (973)383-8745

## **HELP CENTER:**

Applicant's Checklist for Road Opening Permits: (See below for more information)

#### SUBMIT:

- Completed Road Opening Application/Permit
- Application Fee/Payment
- Escrow Fee (if applicable)/Payment
- Deposit and/or Performance/Maintenance Bond
- Information Sheet
- Certificate of Insurance
- Hold Harmless clause Contractor to complete, not the Insurance Carrier
- Drawing Details Provide to your Contractor & to the Township

#### PLEASE REMEMBER

- Call for Utility Mark Out (Call 811 or 1(800)272-1000 BEFORE you Dig)
- Schedule your Road Opening Inspections Call the Hampton Township Department of Public Works- 973-383-8745

# **Payment Requirements:**

- All Fees are based on the Township's Chapter 88 Art. I, Excavations and Openings
- Make Checks Payable to "Township of Hampton"

# TOWNSHIP OF HAMPTON

# **ROAD OPENING APPLICATION/PERMIT**

1 Rumsey Way Newton, NJ 07860 Phone: 973-383-5570	PERMIT No.:
NAME OF APPLICANT:	DATE:
ADDRESS:	CONTRACTOR:
TELEPHONE NUMBER:	ADDRESS:
EMAIL :	TELEPHONE:
LOCATION OF OPENING:	EMAIL:
BLOCK NUMBER LOT NUMBER	CERTIFICATE OF INSURANCE
DESCRIPTION OF WORK:	APPROVED DATE:
SF	KETCH
DATE WORK TO START: DATE WO	ORK TO BE COMPLETED:
If work does not start within 45 days of the date of permit appr	oval, this permit will automatically terminate.
FEES (as applicable): ☐ \$50.00 ☐ \$500 for road paved with paved between two and three years ago ☐ \$25 driveway permit	in the last year \$\square\$ \$300 road paved between one and two years ago \$\square\$ \$100 road \$\square\$ \$150 initial escrow for Township Engineer review
DEPOSIT/BOND: \$ per Code § 88	3-3(A) and (C).
PAYMENT: Amount: \$	Order
<u>REQUIREMENT</u> : Contractor to remove all spoils from the site. purposes, which shall be compacted in 6" lifts.	Contractor shall use only material approved by the Township for backfill
PERFORMANCE /MAINTENANCE DEPOSIT/GUARANTE	<u>:</u> :
□ CASH: \$ □ PERFORM	ANCE/MAINTENACE BOND: \$
Date Received by Township:	
Applicant shall comply with the requirements of Hampton Town	ship Code, Chapter 88, Article I, Excavations and Openings.
Applicant Signature Date	Township Approval Date
INSPECTIONS: Backfill Approval:	Deposit/Bond Release:
Copy to:ApplicantContractorPolice	DeptRoad Dept.

# **Township of Hampton**

# CERTIFICATE OF INSURANCE REQUIREMENTS

- 1. A Required Information Sheet, per attached, must be filled out and returned to the Administrators Office.
- 2. The certificate of Insurance must list Township of Hampton as Additional Insured, and the "Addl Insd" box must be checked in the general Liability section of the certificate. Sample attached. \*Should a prospective bidder or vendor nor have commercial automobile coverage in their business name, please provide a Hired and Non-Owned Automobile Enforcement to the GL policy.
- 3. Explanation and date of work, program, or contract being performed for the Township must be entered in the "Description of Operations" section of the Certificate of Insurance.
- 4. The minimum amount of such comprehensive public liability insurance shall be \$1,000,000 for each claim for bodily injury, \$3,000,000 for multiple claims for bodily injury arising from a single accident and \$500,000 for property damage for a single accident. Such insurance shall remain in full force and effect throughout the effective period of the permit as well as any authorized extensions thereof; all such insurance shall carry an endorsement to the effect that the insurance company will provide at least 10 days' written notice to the Township prior to any modification or policy cancellation.
- 5. A Hold Harmless Clause, per attached, must be filled in and signed by applicant, and returned to the Administrator's Office.

Should you have any questions, please contact the Administrator's Office: 973-383-5570.

# **INFORMATION SHEET**

## **TOWNSHIP OF HAMPTON**

The Township requires the following information to enter vendor/facilities user into risk toolbox.

Please note that a Hold Harmless clause, which is attached, is also required to be completed by the contractor, not the insurance carrier.

Questions regarding these procedures are to be directed to the Township Administrator's office 973-383-5570.

Name of Insured using or coming onto Township Property:	
Business Address:	
City, State, Zip	
Phone No.:	
Contact Person's Name/Title:	,
Contact Person's E-Mail:	
Business Name, if different Than name of insured:	
Type of work, date of work, and For which department, or what Twp. Facilities are being used & when:	
	,

# HOLD HARMLESS CLAUSE TOWNSHIP OF HAMPTON

(To be completed by Contractor)

In consideration of the issuance of a permit, the Contractor is deemed to agree to hold harmless and indemnify the Township of Hampton, its employees, agents and representatives from and against all damage, harm, injury, death, expense, cost, loss, claim, dispute, suit and attorney's fees resulting from the negligence, acts and/or omissions of the Contractor and its subcontractors, employees, agents and/or representatives in connection with or in the course of designing, planning, performing and concluding the project in question.

•	(Contractor's signature)
	(Title)
	(Date)