

HUNTINGTON COUNTY HIGHWAY DEPARTMENT
ROAD CUT PERMIT

Name: _____

Address: _____

Phone Number: _____

Location of Road Cut: _____

Surface type of road: _____

Approximate Date of Cut: _____

Application will expire after 12 months from above date if no work is performed.

Purpose of Cut: _____

Depth of Cut: _____ Width of Cut: _____

RESPONSIBILITY OF APPLICANT:

The applicant will be responsible for the proper signing of the road, whether it is closed or down to one lane and all liability with this project until the final layer of asphalt is placed.

The applicant will notify the appropriate offices, including the Sheriff's Department (356-8316), School Bus Garage (358-2217), etc. of the closing of such road.

The applicant will be responsible for the placement of materials for backfilling and compaction of said materials in order for the road surface to be a condition which is safe for traffic. Asphalt depth to be a minimum of 4 inches of #9 surface asphalt. Applicant must call the Huntington County Highway Department (358-4881) for a foreman who must be on site prior to applicant's work or any backfill. The stone backfill will be #8 limestone backfilled uniformly in the cut up to the final 12 inch mark. The last 12 inches will be #53 stone compacted in two (2) 6 inch lifts with a vibratory jumping jack or compactor. The top 4 inches will be cut out and the final asphalt lay will be compacted in place. Road rehabilitation must be completed within 10 days of initial cut. After one warning, if the Highway Department has to asphalt the cut, the applicant agrees to pay the asphalt, labor and trucking costs.

Signature _____

Printed Name _____

Phone _____

Date _____