Permit for Street Opening - City of North Canton

Date_____ Permit # _____

Address where work will be done _____

Purpose of street opening _____

Type of pavement _____

Size of cut _____ Sq. Ft. _____Sq. Yds.

Fees:

Permits fee $_____

Deposit $_____ Contact Engineering Department 90 days after final inspection of pavement for refund of deposit at 330-499-3465.

Total $_____

The applicant/contractor hereby agrees to the conditions of Ordinances #2535 and #2319.

Work MUST be done by a Registered Contractor with the City of North Canton.

Permits is require before staring ANY work in the City of North Canton.

Applicants signature _____

Phone _____

Mailing Address _____

Completion of temporary patch _____ by _____
Date Inspector

Completion of permanent patch _____ by _____
Date Inspector

Refund deposit returned _____ by _____
Date Engineering Employee

Approved by City Engineer _____
James Benekos

Final Measurements

Size _____ Sq. Yds. _____