



# TOWN OF MEDFIELD

Permit issued by  
*Department of Public Works*  
459 Main Street  
Medfield, MA 02052  
508-906-3003, [dpwoffice@medfield.net](mailto:dpwoffice@medfield.net)

## **STREET EXCAVATION PERMIT**

### **APPLICATION & AGREEMENT**

THIS PERMIT MUST BE FULLY COMPLETED PRIOR TO CONSIDERATION

*This permit is non-transferable and is valid only for the property and applicant listed. Any change in ownership or use requires submission of a new permit application and approval.  
Permit fees are non-refundable and non-transferable.*

Application is hereby made for a permit to open \_\_\_\_\_ in said Medfield at, \_\_\_\_\_.

The opening will be \_\_\_\_\_ feet into the public way. Said opening will be made on \_\_\_\_\_. The opening is for the purpose of \_\_\_\_\_.

DIG SAFE NUMBER \_\_\_\_\_

If said permit is granted, I/we hereby agree as follows:

1. To begin the opening no later than \_\_\_\_\_ and close on the same day.
2. To restore the opened area to the same condition in which it was prior to the opening, including the surfacing of the same to conform to the surface of the surrounding area as required with the "Permit" and "Street Excavation Regulations" of the Town of Medfield.
3. To notify in writing in accordance with Chapter 370, Acts of 1963, by certified mail, at least 48 hours prior to opening the street, all public utility companies having installations in said street.
4. To post with the Superintendent of Public Works, prior to the issuance of the permit, a certified check in an amount deemed sufficient by them to ensure the completion of the work contemplated; and I/we further agree that the whole or part may be used for temporary repairs or permanent restoration made by the Town.

Refundable Deposit Amount \$\_\_\_\_\_ Date: \_\_\_\_\_ Check Number : \_\_\_\_\_ 5. To indemnify and save harmless the Town of Medfield of and from any claim for damage or injury arising out of or as a result of the work done by virtue of any such permit and to furnish evidence that he carries the following insurance to the following amounts:

Combined Single Limit

\$300,000 Property

\$500,000 Liability

6. To comply with all lawful orders of the Town of Medfield relative to the permitted work.
7. To provide and maintain necessary signs and lights.
8. If a street must be closed off, we will notify all abutters on the street in advance and post necessary warning signs. Street closing will be kept to a minimum.

WITNESS My\Our hand and Seal the day and date first above written:

Signed \_\_\_\_\_ Title \_\_\_\_\_

Company \_\_\_\_\_ Address \_\_\_\_\_

Phone # \_\_\_\_\_ Email \_\_\_\_\_

(Note: if the applicant is a corporation, a certificate of authorization from the officer will be required.)

**TOWN OF MEDFIELD**  
**STREET EXCAVATION PERMIT**

Permission is hereby given to \_\_\_\_\_ of \_\_\_\_\_ to excavate in \_\_\_\_\_ a public way in the Town of Medfield for a distance of \_\_\_\_\_ ft. for the purpose of installing \_\_\_\_\_ on \_\_\_\_\_.

Permission is given pursuant to compliance with the attached application and regulations which are part of the permit and pursuant to the completion of the permit. \_\_\_\_\_

**SPECIAL REQUIREMENTS:** \_\_\_\_\_

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**DATE ISSUED**

**SUPERINTENDENT OF PUBLIC WORKS**

(Final Signature)

**NOT VALID UNTIL COMPLETED**

**FIRE DEPARTMENT** has received notice of the above excavation.

Explosive permit issued \_\_\_\_\_

Other Requirements: \_\_\_\_\_

DATE: \_\_\_\_\_

SIGNED: \_\_\_\_\_

**CHIEF, FIRE DEPARTMENT**

**POLICE DEPARTMENT** has received notice of the above excavation.

POLICE OFFICER REQUIRED      YES     NO

STREET CLOSED      YES     NO     If yes, abutters notified (Date) \_\_\_\_\_

Warning signs must be placed on both sides of the excavation, 300 feet from the opening in each direction. At night, lights must also be placed in these same locations to ensure proper visibility. Barricades are required on both sides of the excavation to prevent access and ensure public safety. No excavation may be left open overnight without obtaining special permission from the Chief of Police.

DATE: \_\_\_\_\_ SIGNED: \_\_\_\_\_

**CHIEF, POLICE DEPARTMENT**

**TREE DEPARTMENT** shall be notified if excavation comes within 10 ft. of a tree within the Town way.

DATE: \_\_\_\_\_ SIGNED: \_\_\_\_\_

**TREE WARDEN**

**RELEASE OF COLLATERAL**

1. The cost of repairs made by the Town because of the project is \$ \_\_\_\_\_. The amount to be returned is \$ \_\_\_\_\_.
2. The work has been satisfactorily completed and it is recommended that the deposit of \$ \_\_\_\_\_ be returned.