



BOARD OF
COUNTY COMMISSIONERS

COUNTY OF GLOUCESTER
STATE OF NEW JERSEY

DIRECTOR
Frank J. DiMarco

COMMISSIONER LIAISON
Matthew Weng



DEPARTMENT OF PUBLIC WORKS
OFFICE OF THE COUNTY
ENGINEER

Barry C. Beckett, P.E.
County Engineer

OFFICES OF GOVERNMENT
SERVICES
1200 N. DELSEA DRIVE
CLAYTON, NJ 08312

Phone: 856-307-6600
Fax: 856-307-6606
bbeckett@co.gloucester.nj.us

www.gloucestercountynj.gov

The County of Gloucester complies with all state and federal rules and regulations against discrimination in admission to, access to, or operations of its programs, services, and activities. In addition, County encourages participation of people with disabilities in its programs and activities and offers special services to all residents 60 years of age and older. Inquiries regarding compliance may be directed to the County's ADA Coordinator at (856) 384-6842/ New Jersey Relay Service 711.

CHECKLIST FOR ROAD OPENING PERMITS GLOUCESTER COUNTY PUBLIC WORKS, HIGHWAY DIVISION

MAJOR & MINOR DEVELOPMENTS

- ☐ TWO (2) APPROVED & SIGNED PLANS FROM PLANNING DIVISION, WITH REPORT OF ACTION
- ☐ CERTIFICATE OF LIABILITY INSURANCE (COVERAGE NO LESS THAN \$1 MILLION) WITH THE COUNTY LISTED AS A CERTIFICATE HOLDER.
- ☐ COMPLETED APPLICATION
- ☐ PERFORMANCE BOND (POSTED WITH PLANNING)
- ☐ FEE (NON-REFUNDABLE – CALCULATED DURING PERMIT REVIEW)
- ☐ NJDOT COMPLIANT TRAFFIC CONTROL PLAN

RESIDENTIAL DRIVEWAYS & UTILITY OPENINGS

- ☐ TWO (2) DETAILED PLOT PLANS WITH DRIVEWAY OR OPENING DESIGNATED
- ☐ CERTIFICATE OF LIABILITY INSURANCE (COVERAGE NO LESS THAN \$1 MILLION) WITH THE COUNTY LISTED AS A CERTIFICATE HOLDER.
- ☐ COMPLETED APPLICATION
- ☐ PERFORMANCE BOND – (CALCULATED DURING PERMIT REVIEW)
- ☐ FEE – (NON-REFUNDABLE – CALCULATED DURING PERMIT REVIEW)
- ☐ REPORT OF ACTION FROM THE COUNTY PLANNING BOARD (WHEN APPLICABLE)
- ☐ NJDOT COMPLIANT TRAFFIC CONTROL PLAN (WHEN APPLICABLE)

NO PERMIT WILL BE ACCEPTED UNLESS ABOVE REQUIREMENTS ARE MET. WE DO NOT ACCEPT ELECTRONIC SUBMISSIONS.

ANY QUESTIONS REGARDING THE ABOVE MAY BE DIRECTED TO THE PUBLIC WORKS DEPARTMENT, HIGHWAY DIVISION AT 856-307-6400.



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**CERTIFICATE OF LIABILITY INSURANCE REQUIREMENTS
FOR THE HIGHWAY PERMIT DIVISION
\$1,000,000.00 POLICY**

**MAY SUBMIT CERTIFICATE OF LIABILITY INSURANCE FROM
THE CONTRACTOR NAMING THE COUNTY AS
CO-HOLDER WITH THE FOLLOWING ADDRESS**

**COUNTY OF GLOUCESTER
BOARD OF COUNTY COMMISSIONERS
ITS DEPARTMENTS AND AGENCIES
PO BOX 337
WOODBURY, NJ 08096
ATTN. – HIGHWAY PERMIT DEPARTMENT**

**IF YOU HAVE ANY QUESTIONS CONCERNING THE INSURANCE
CERTIFICATES PLEASE CONTACT
PHONE # 856-307-6400
FAX # 856-307-6606**

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GLOUCESTER COUNTY HIGHWAY DIVISION PERMIT ADDENDUM

This permit becomes null and void if work or construction authorized is not commenced within **180** days at any time after work is commenced. Renewal of Permits will be on a case by case basis. The Applicant must produce proof of hardship to obtain a Permit renewal.

I hereby certify that I have read and examined this application and know the same to be true and correct. All provision of laws and ordinances governing this type of work will be complied with whether specified herein or not. The granting of a Permit does not presume to give authority to violate or cancel the provision of State, County, or Municipal codes regulating the performance of construction.

All statements made by the Applicant must be true and correct; misinformation will void said Permit. Therefore, the Applicant forfeits their posted Performance Guarantee to the County of Gloucester.

Signature of Contractor of Authorized Agent

Date

Signature of Owner (if owner)

Date

Barry C. Beckett

Barry C. Beckett, P.E., County Engineer

Adopted

June 7, 2000

Verification of Signature: Permit Division

Date

PERMIT #

GLOUCESTER COUNTY DEPARTMENT OF PUBLIC WORKS
1200 N. DELSEA DR. (SH#47) CLAYTON, NJ 08312 (856) 307-6400
GOVERNMENT SERVICES BUILDING FAX (856) 307-6606

APPLICATION FOR PERMIT

| | |
|--------------------------|--------------|
| <input type="checkbox"/> | ROAD OPENING |
| <input type="checkbox"/> | ACCESS |
| <input type="checkbox"/> | CURBING |

ACCESS FOR:

| | |
|-------------------------------------------|-----------------------------------------------|
| <input type="checkbox"/> PRIVATE USE | <input type="checkbox"/> RESIDENCE & BUSINESS |
| <input type="checkbox"/> COMMERCIAL MINOR | <input type="checkbox"/> COMMERCIAL MAJOR |
| <input type="checkbox"/> SERVICE STATION | |

APPLICANT _____

MAILING ADDRESS _____

CITY _____ STATE _____ ZIP _____ PHONE(____) _____

EMAIL ADDRESS: _____ FAX(____) _____

EMERGENCY CONTACT _____

MAILING ADDRESS _____

CITY _____ STATE _____ ZIP _____ PHONE(____) _____

FAX (____) _____

INSURANCE COMPANY _____

POLICY # _____ PHONE # _____

PERFORMANCE BOND / L.O.C. COMPANY _____

POLICY # _____ PHONE # _____

COUNTY ROAD (ROAD NAME) _____ CR # _____

MUNICIPALITY (IN WHICH ROAD OPENING IS LOCATED) _____

MUNICIPALITY # _____

LOCATION (GIVE EXACT LOCATION IN REFERENCE TO DISTINCT LANDMARKS, ie.
INTERSECTIONS, BRIDGES, etc.):

| | | |
|--|--|--|
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |

BLOCK _____ LOT _____

PERMIT NEEDED FOR: (ie GAS LINE, WATER LINE, CURB, DRIVEWAY, etc.)

WIDTH _____ LENGTH _____ DEPTH _____ SQ FT _____ CURB _____ LIN. FT.

ISSUED DATE

| | | |
|---------------------------|---------------|-------|
| DEPARTMENT USE ONLY | | |
| PERMIT#: | | |
| PLANNING #: | | |
| PERMIT FEE RECEIVED \$ | | |
| UTILITY CO. FEE BILLED \$ | | |
| MONTH | | |
| CHECK NUMBER | BOND | |
| FEE | DATE RECEIVED | |
| PERFORMANCE BOND RECEIVED | | |
| CIRCLE ONE | | |
| BOND | L.O.C. | CHECK |
| \$ | | |
| NUMBER | | |
| INSPECTOR ASSIGNED | | |
| INSPECTOR'S APPROVAL | | |
| DATE | | |
| COMPLETION DATE: | | |
| FINAL RESTORATION | | |
| MAINTENANCE PERIOD | | |
| TWO (2) YEARS | | |
| MAINTENANCE RELEASE DATE | | |

MAINTENANCE BOND

\$ _____

DEVELOPMENT NAME

LAW (N.J.S.A.48:2-73 REQUIRES PROOF THAT NJ ONE-CALL (1-800-272-1000) HAS BEEN NOTIFIED PRIOR TO ISSUING A PERMIT. PLEASE ENTER THE CONFIRMATION NUMBER(S) ASSIGNED _____

DATE WORK WILL START ON _____ ANTICIPATED COMPLETION DATE _____

REMARKS _____

THE APPLICANT AGREES TO COMPLY WITH THE REGULATIONS CONTAINED IN THIS ORDINANCE GOVERNING ROADS AND STREET OPENINGS IN THE COUNTY OF GLOUCESTER AS ALL LAWS, ORDINANCES AND RESOLUTIONS RELATING TO SAID WORK AND THE ACCEPTANCE OF THE PERMIT SHALL BE DEEMED AN AGREEMENT TO ABIDE BY OF ITS TERMS AND CONDITIONS.

SIGNED BY APPLICANT _____ NAME PRINTED _____ DATE ____/____/____

☒ PERMIT IS EFFECTIVE FOR 180 DAYS AFTER DATE OF ISSUANCE

YOU ARE HEREBY GRANTED PERMISSION TO MAKE OPENING IN THE COUNTY ROAD AND PERFORM WORK AND INSTALL FACILITIES THEREIN, IN ACCORDANCE WITH THE PLANS ATTACHED AND REGULATIONS PERTAINING THERETO.

COUNTY AUTHORIZED SIGNATURE _____ DATE ____/____/____

TITLE

WHITE -OFFICE YELLOW-APPLICANT PINK-INSPECTOR