

**Right-Of-Way / Street Cut / Road Bore
PERMIT**

**Town of Whiteland
Department of Public Works
549 Main Street
Whiteland, Indiana 46184
(317) 535-5531 x225**

Permit Number _____

Date _____

Name of Contractor of Utility _____

Address _____ **City** _____ **Zip** _____

Contact Person _____ **Phone** _____

Location of Cut _____

Reason for Cut _____

Name of Applicant / Owner _____

Address _____ **City** _____ **Phone** _____

Date Work Will Begin _____

Estimated Date of Completion _____

**Bonds, Maps, Sketches & Other Exhibits as follows:
(List each separately)**

Date _____

Applicant Signature

Permit Approved by _____

Date _____ **Title** _____

(COPY OF PERMIT MUST BE ON JOB SITE AT ALL TIMES)