



City of Framingham

Application for Permit to Open, Occupy or Obstruct a Street or Sidewalk (SOP)



**UTILITY – WATER, SEWER, GAS, ELECTRIC, TELECOM
OBSTRUCTION, BORING/WELL, SIDEWALK, CURBING**

Permit Instruction, Fee Table, Contact Submittal and Agreement

Instruction

Only forms containing the proper level of information will be processed. Submittals are normally processed in 5 Business Days. Unless requested and stated under the approved Permit, the standard SOP duration coverage is granted for 30 days

Fee Table (please note fees are non-refundable) (*) per August 7, 2007 Board of Selectmen SOP Policy approval

Category	Coverage	Fee (*)
Type 1	Surface cuts up to 100 sq ft	\$ 75.00
Type 2	Surface cuts over 100 sq ft	\$ 150.00
Type 3	Borings up to 3 locations	\$ 75.00
Type 4	Borings greater than 3 locations	\$ 150.00
Type 5	Street or Sidewalk Obstructions (work zones)	\$ 50.00
Type 6	Permit Renewal	\$ 50.00

Contact Information

Blank SOP forms can be obtained at the DPW facility at 110 Western Ave. or from the City's web site (www.FraminghamMa.gov/dpwpermits). Applicant shall notify DPW a minimum off 48 hours before starting work by contacting DPW at 508-532-6010 or dpwpermits@FraminghamMA.gov. The only exception will be for Emergency Cases – Reference SOP Policy Section 5, paragraph 4.

SOP Stipulations and Agreement

- a) Applicant agrees to adhere and comply with the City of Framingham SOP Policy. Applicant will conform to the City's ordinances and policies, to protect the work and guard against accident, to be accountable/liable for the cost of any damage or injury which may result from the work, to restore the street to a condition as good as it may be in at the time the permit is granted and to the satisfaction of the City. Further, it is the Applicant's responsibility to have current Insurance coverage at the limits specified by the City, and a Bond if requested for the amount specified before the start of any work. All work must be staged to enable streets to remain passable for emergency vehicles.
- b) Applicant will obtain and maintain a valid Digsafe ticket and provide the City with advance 48-notice prior to start of construction work.
- c) Applicant will comply with the City's construction season of April 1st to November 15th and standard days/hours of Monday through Friday 7:30 AM to 4:30 PM. The City will review exceptions to the above time restrictions (i.e. Saturday/Sunday, and off hours 7PM to 5AM) for large projects or traffic sensitive cases. Applicants seeking such a request must provide sufficient justification, condition details, and advance notification (minimum 15 calendar days prior to target start date).

I, the undersigned Permittee hereby understand with the acceptance of an Approved SOP permit to the above SOP Stipulations and Agreement points.

ACCEPTANCE SIGNATURE _____ **Date** _____

APPLICANT MUST SIGN AND DATE



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Work Scope Information

COMPLETED BY APPLICANT

Check and furnish all information under this Section – Failure to do so may result in the Application **NOT BEING PROCESSED**

DPW CITY PROJECT <input type="checkbox"/> (YES) <input type="checkbox"/> (NO) <input type="checkbox"/> Note _____	DIGSAFE TICKET Number: _____ PERMIT # STR _____	FEE PAYMENT <input type="checkbox"/> Cash <input type="checkbox"/> Check # _____ <input type="checkbox"/> Online <input type="checkbox"/> Note _____																												
WORK TYPE <input type="checkbox"/> Utility <input type="checkbox"/> Main <input type="checkbox"/> Service <input type="checkbox"/> Electric <input type="checkbox"/> Cable/Telcom/Conduit <input type="checkbox"/> Gas <input type="checkbox"/> Water <input type="checkbox"/> Sewer <input type="checkbox"/> Sidewalk <input type="checkbox"/> Curbing <input type="checkbox"/> Well/Boring/Pole <input type="checkbox"/> Dumpster/Obstruction <input type="checkbox"/> _____ _____ _____	WORK LOCATION <input type="checkbox"/> Street Number _____ or Range _____ <input type="checkbox"/> Street Name _____ <input type="checkbox"/> Cross Street(s) _____ <input type="checkbox"/> Location Note _____ WORK DESCRIPTION (i.e. Install New Sewer Service, Repair Water Service) <input type="checkbox"/> _____ _____ _____ _____ _____																													
WORK CATEGORY/TYPE <input type="checkbox"/> Scheduled <input type="checkbox"/> Emergency <input type="checkbox"/> Demo Building-C/C Services <input type="checkbox"/> New Install <input type="checkbox"/> Retire Exist & Relay New <input type="checkbox"/> Repair Existing <input type="checkbox"/> Work Zone/Obstruction <input type="checkbox"/> Other _____ _____ _____	SURFACE CUTS/OPENINGS <table border="0"> <thead> <tr> <th></th> <th>Number</th> <th>Cut Sizes (LxW)</th> <th>Overall SF</th> </tr> </thead> <tbody> <tr> <td><input type="checkbox"/> Street</td> <td>_____</td> <td>_____ x _____</td> <td>= _____</td> </tr> <tr> <td><input type="checkbox"/> Sidewalk</td> <td>_____</td> <td>_____ x _____</td> <td>= _____</td> </tr> <tr> <td><input type="checkbox"/> Boring</td> <td>_____</td> <td>_____ x _____</td> <td>= _____</td> </tr> <tr> <td><input type="checkbox"/> Pole</td> <td>_____</td> <td>_____ x _____</td> <td>= _____</td> </tr> <tr> <td><input type="checkbox"/> Other</td> <td>_____</td> <td>_____ x _____</td> <td>= _____</td> </tr> <tr> <td>TOTAL # CUTS</td> <td><input type="text"/></td> <td>TOTAL SF</td> <td><input type="text"/></td> </tr> </tbody> </table>		Number	Cut Sizes (LxW)	Overall SF	<input type="checkbox"/> Street	_____	_____ x _____	= _____	<input type="checkbox"/> Sidewalk	_____	_____ x _____	= _____	<input type="checkbox"/> Boring	_____	_____ x _____	= _____	<input type="checkbox"/> Pole	_____	_____ x _____	= _____	<input type="checkbox"/> Other	_____	_____ x _____	= _____	TOTAL # CUTS	<input type="text"/>	TOTAL SF	<input type="text"/>	WORK WINDOW REQUEST Standard 30 Day Duration SOP Coverage <input type="checkbox"/> (YES) <input type="checkbox"/> (NO) ID Below <input type="checkbox"/> 60 Day <input type="checkbox"/> 90 Day <input type="checkbox"/> 120 Day <input type="checkbox"/> _____ Initial Schedule Projection <input type="checkbox"/> Start Date _____ <input type="checkbox"/> End Date _____
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CONTACT INFORMATION CONTRACTOR and PROPERTY OWNER (Property Owner if applicable) <table border="0"> <thead> <tr> <th></th> <th><u>CONTRACTOR</u></th> <th><u>PROPERTY OWNER</u></th> </tr> </thead> <tbody> <tr> <td>Company Name</td> <td>_____</td> <td>_____</td> </tr> <tr> <td>Contact Person</td> <td>_____</td> <td>_____</td> </tr> <tr> <td>Address</td> <td>_____</td> <td>_____</td> </tr> <tr> <td>Town/State/Zip</td> <td>_____</td> <td>_____</td> </tr> <tr> <td>Telephone/Cell</td> <td>_____</td> <td>_____</td> </tr> <tr> <td>Email</td> <td>_____</td> <td>_____</td> </tr> </tbody> </table>				<u>CONTRACTOR</u>	<u>PROPERTY OWNER</u>	Company Name	_____	_____	Contact Person	_____	_____	Address	_____	_____	Town/State/Zip	_____	_____	Telephone/Cell	_____	_____	Email	_____	_____							
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Work Scope Detail Drawing

COMPLETED BY APPLICANT

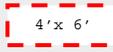
To avoid permit rejection or delays the Applicant should reference the **Application Submittal Instructions and Checklist** guidelines to ensure completion of the required drawing level and information content necessary to process the application request.

DETAIL DRAWING

(BELOW) (ATTACHED)



Large empty area for drawing details.

SCALE <input type="checkbox"/> 1" = _____ <input type="checkbox"/> Not to Scale	APPLICANT/COMPANY NAME <input type="checkbox"/> _____ _____	WORK SITE ADDRESS/LOCATION <input type="checkbox"/> _____ _____	KEY (any symbol or notes)  4' x 6' (Example) Limit of Surface Cut
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