



TOWN OF CHILMARK

Building Inspector
PO Box 119 / 401 Middle Road
Chilmark, MA 02535
Tel: 508-645-2100 / Fax: 508-645-2110

Permit # _____

Issue Date _____

Expiration Date _____

TRENCH PERMIT

Pursuant to G.L. c. 82A §1 and 520 CMR 7.00 et seq. (as amended)

This permit must be fully completed prior to consideration.

<u>Name of Applicant</u>	Phone	Cell
Street Address		
City/Town MA Zip		
<u>Name of Excavator</u> <i>(if different from applicant)</i>	Phone	Cell
Street Address		
City/Town MA Zip		
<u>Name of Owner(s) of Property</u>	Phone	Cell
Street Address		
City/Town MA Zip		
Other Contact	Permit Fee Received No () Yes ()	
Description, location and purpose of proposed trench: Map _____ Lot _____ Please describe the exact location of the proposed trench and its purpose (include a description of what is (or is intended) to be laid in proposed trench (eg: pipes/cable lines, etc...) Please use reverse side if additional space is needed.		
Insurance Certificate #:		
Name and Contact Information of Insurer:		
Policy Expiration Date:		
Dig Safe #:		
Name of Competent Person (as defined by 520 CMR 7.02):		

Massachusetts Hoisting License #	
License Grade:	Expiration Date:

BY SIGNING THIS FORM, THE APPLICANT, OWNER, AND EXCAVATOR ALL ACKNOWLEDGE AND CERTIFY THAT THEY ARE FAMILIAR WITH, OR, BEFORE COMMENCEMENT OF THE WORK, WILL BECOME FAMILIAR WITH, ALL LAWS AND REGULATIONS APPLICABLE TO WORK PROPOSED, INCLUDING OSHA REGULATIONS, G.L. C 82A, 520 CMR 7.00 et seq., AND ANY APPLICABLE MUNICIPAL ORDINANCES, BY-LAWS AND REGULATIONS AND THEY COVENANT AND AGREE THAT ALL WORK DONE UNDER THE PERMIT ISSUED FOR SUCH WORK WILL COMPLY THEREWITH IN ALL RESPECTS AND WITH THE CONDITIONS SET FORTH BELOW.

THE UNDERSIGNED OWNER AUTHORIZES THE APPLICANT TO APPLY FOR THE PERMIT AND THE EXCAVATOR TO UNDERTAKE SUCH WORK ON THE PROPERTY OF THE OWNER, AND ALSO, FOR THE DURATION OF CONSTRUCTION, AUTHORIZES PERSONS DULY APPOINTED BY THE MUNICIPALITY TO ENTER UPON THE PROPERTY TO MONITOR AND INSPECT THE WORK FOR CONFORMITY WITH THE CONDITIONS ATTACHED HERETO AND THE LAWS AND REGULATIONS GOVERNING SUCH WORK.

THE UNDERSIGNED APPLICANT, OWNER AND EXCAVATOR AGREE JOINTLY AND SEVERALLY TO REIMBURSE THE MUNICIPALITY FOR ANY AND ALL COSTS AND EXPENSES INCURRED BY THE MUNICIPALITY IN CONNECTION WITH THIS PERMIT AND THE WORK CONDUCTED THEREUNDER, INCLUDING BUT NOT LIMITED TO ENFORCING THE REQUIREMENTS OF STATE LAW AND CONDITIONS OF THIS PERMIT, INSPECTIONS MADE TO ASSURE COMPLIANCE THEREWITH, AND MEASURES TAKEN BY THE MUNICIPALITY TO PROTECT THE PUBLIC WHERE THE APPLICANT, OWNER OR EXCAVATOR HAS FAILED TO COMPLY THEREWITH INCLUDING POLICE DETAILS AND OTHER REMEDIAL MEASURES DEEMED NECESSARY BY THE MUNICIPALITY.

THE UNDERSIGNED APPLICANT, OWNER AND EXCAVATOR AGREE JOINTLY AND SEVERALLY TO DEFEND, INDEMNIFY, AND HOLD HARMLESS THE MUNICIPALITY AND ALL OF ITS AGENTS AND EMPLOYEES FROM ANY AND ALL LIABILITY, CAUSES OR ACTION, COSTS, AND EXPENSES RESULTING FROM OR ARISING OUT OF ANY INJURY, DEATH, LOSS, OR DAMAGE TO ANY PERSON OR PROPERTY DURING THE WORK CONDUCTED UNDER THIS PERMIT.

_____ APPLICANT'S SIGNATURE	_____ DATE
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_____ EXCAVATOR'S SIGNATURE (<i>IF DIFFERENT</i>)	_____ DATE
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_____ OWNER'S SIGNATURE (<i>IF DIFFERENT</i>)	_____ DATE
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For City/Town Use – Do not write in this section	
PERMIT APPROVED BY:	APPLICATION FEE: \$ _____
PERMITTING AUTHORITY:	DATE: _____
CONDITIONS OF APPROVAL:	