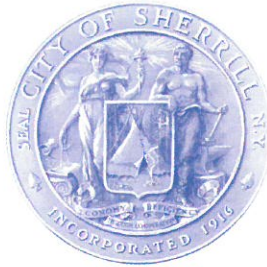


Brandon Lovett, *City Manager*  
 Michael Holmes, *Comptroller/City Clerk*  
 Jeffrey Baker, *Supt. Public Works*  
 Robert Drake, *Police Chief*  
 Sara Getman, *Recreation Supervisor*  
 Kevin Mumford, *Supt. Waste Water Treatment*  
 James Whitcombe, *Supt. Power & Light*



COMMISSIONERS  
 William Vineall, *Mayor*  
 Patrick Hubbard, *Deputy Mayor*  
 Thomas Dixon  
 David Hyle  
 Joseph Shay

## CITY OF SHERRILL

377 Sherrill Rd. • Sherrill, N.Y. 13461 • Telephone: (315) 363-2440 • Fax: (315) 363-0031 • [www.sherrillny.org](http://www.sherrillny.org)

### APPLICATION FOR EXCAVATION PERMIT

Date: \_\_\_\_\_

Applicant: \_\_\_\_\_

Address: \_\_\_\_\_  
 \_\_\_\_\_

Office Use Only		
Description	Amount Due	Pd.
App. Fee	\$50.00	
Deposit	\$1,000	

Owner of Property: \_\_\_\_\_

Address of Excavation: \_\_\_\_\_



**Show width and length of cut, and whether road is paved or unpaved.**

Total sq. ft. of cut:

Marginal strip \_\_\_\_\_ (@ \$2.00/sq. ft.) = \$ \_\_\_\_\_

Roadway \_\_\_\_\_ (@ \$6.00/sq. ft.) = \$ \_\_\_\_\_

**(Minimum deposit \$1,000.00 by certified or personal check)**

Checklist: Inspection Fee: \$ 50.00  
 Deposit: \$ 1,000  
 Insurance: \$ 500,000

**Insurance Note:** CSL public liability with City of Sherrill as additional insured along with contractor and/or owner.

Signature of Applicant: \_\_\_\_\_

**APPLICATION IS (CIRCLE ONE):      APPROVED      DENIED**

\_\_\_\_\_  
Date

\_\_\_\_\_  
City Manager

### DEPOSIT CHECK RETURN APPROVED

\_\_\_\_\_  
Date

\_\_\_\_\_  
City Manager

**Deposit will be returned upon timely and proper restoration of the disturbed area.**