South Strabane Township
550 Washington Road
Washington, PA 15301

TOWNSHIP ROAD ENTRANCE PERMIT

No. _____ Receipt is acknowledged of fees paid as follows:

Issuing Permit ..... $

County ..... Township inspection fee ..... $ .....

Township ..... Total ..... $ .....

Township Route No. ..... Check or money order ..... $ .....

Permission is hereby granted to .....
(Permittee)

of ..... (Post Office Address) Pennsylvania, to .....

.....
(Description and Purpose of Work)

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under and subject to all the conditions, restrictions, and regulations prescribed by the Township Supervisors on the reverse hereof, a true copy whereof is attached and made a part hereof, with the same force and effect as if written or printed herein and under and subject to the special conditions, restrictions, and regulations hereinafter set forth. (Special requirements may be here written, or attached by rider in which event it should be stated in this space) .....

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All work under this permit to be completed on or before ..... *

The Township Supervisors, may at any time revoke and annul this permit for non-performance of, or non-compliance with any of the conditions, restrictions, and regulations hereof.

..... Township ..... County

By .....
(Name and Title)

.....
(Address)

Date .....

* Permit void after this date. Immediately upon completion of the work permittee should notify the Secretary of the Township