



Town of Pembroke

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

Section 1 – Permit Instruction, Fee Table, Contact Submittal and Agreement

1.1 Instruction

The “APPLICANT” (person or company requesting said permit) shall refer to the Application Requirements and Instructions Checklist to help fill out this form. Only forms containing the proper level of information will be processed. Hence, to avoid permit rejection or delays the Applicant should accurately complete and deliver the SOP form to the Town of Pembroke (such submittals normally are processed in 5 Business Days). Unless requested and stated under the approved Permit the standard SOP duration coverage is granted for 30 days.

1.2 Fee Table (please note fees are nonrefundable) per April 1, 2023 Town Manager SOP Policy approval

Category	Coverage	Fee
Type 1	Surface cuts up to 100 SF	\$ 75.00
Type 2	Surface cuts greater than 100 SF to 150 SF	\$ 150.00
	Each Additional 150 SF thereafter	\$ 25.00
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
Type 7	Permit in New-Pavement Moratorium up to 100 SF	\$5,000.00
Type 8	Permit in New Pavement Moratorium over 100 SF	\$10,000.00

1.3 Contact Information

Blank SOP forms and Guideline Instructions can be obtained at the DPW facility at 100 Center Street or from the Town's web site (www.Pembroke-MA.gov). The main contact telephone number you can use to direct any questions regarding SOP applications or work is (781) 293-5620. Advance 48 hour Schedule Work Notification (SWN) MUST BE MADE VIA FAX (781) 293-2964 or E-MAIL (rcampbell@townofpembroke-ma.org) or Mail or Hand Delivery to the above address by the Applicant prior to start of construction, reference paragraph 1.4 b) below. The Only exception to the SWN requirement will be made for Emergency Cases – Reference SOP Policy Section 5, paragraph 4).

1.4 SOP Stipulations and Agreement

- Agrees to adhere and comply with the Town of Pembroke SOP Policy. Conform to the Town's statutes and By-Laws, 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 Town. Further, it is the Applicants responsibility to have current Insurance coverage at the limits specified by the Town and a Bond in place for the amount specified before the start of any work. All work must be staged such to enable streets to remain passable for Emergency vehicles (care taken regarding work zone and material storage).
- Obtain and maintain a valid Digsafe ticket and to provide the Town with advance 48 hour Schedule Work Notification (SWN) prior to start of construction work (mandatory to coordinate Police, Fire, and DPW inspection support, as well as to ensure public safety). SWN NOTIFICATION MUST BE MADE by returning a copy of the issued Permit with the completed Schedule section filled in and delivered to the Town VIA E-mail, Mail or Hand Delivered, the only exception shall be for Emergency work (Gas, Water, Sewer, Cable, and Electrical: service/outage repair or corrosion/leaks that present a safety issue to the Public). ***Note: Failure to comply with the SWN policy may result in the Town issuing an immediate Violation notice resulting in the cessation of work (min. 1 day) and no new permits granted until the violation is resolved, and the potential for other SOP restrictions issued against the Permittee.***
- Comply with the Town's work window/ moratorium of April 1st to November 15th and standard days/hours of Monday thru Thursday 8:00 AM to 4:30 PM and Friday 8:00 AM to 12PM Noon. The Town will upon request review exceptions to the above working window limits (i.e. Saturday/Sunday, and off hours 7PM to 5AM) for large projects or traffic sensitive cases. However, an applicant seeking such a request must provide sufficient justification, condition details, and advance notification (minimum 15 calendar days prior to target start date) so the Town can adequately evaluate and issue a decision regarding special work window limits.

I, the undersigned Permittee herby 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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Section 2a – 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

2.1 DPW TOWN PROJECT <input type="radio"/> (YES) <input type="radio"/> (NO) Permit # _____	2.2 DIGSAFE TICKET <input type="radio"/> Number: _____ <input type="radio"/> Valid to: _____ / _____ / 2021	2.3 FEE PAYMENT <input type="radio"/> Cash <input type="radio"/> Check # _____ <input type="radio"/> Note _____																					
2.4 WORK TYPE <input type="radio"/> Utility <input type="radio"/> Main <input type="radio"/> Service <input type="radio"/> Electric <input type="radio"/> Cable/Telcom/Conduit <input type="radio"/> Gas <input type="radio"/> Water <input type="radio"/> Sewer <input type="radio"/> New <input type="radio"/> _____ <input type="radio"/> _____ <input type="radio"/> Driveway Sidewalk <input type="radio"/> Curbing <input type="radio"/> Well/Boring/Pole <input type="radio"/> Dumpster/Obstruction <input type="radio"/> _____ <input type="radio"/> _____ <input type="radio"/> _____	2.5 WORK LOCATION <input type="radio"/> Street Number _____ or Range _____ <input type="radio"/> Street Name _____ <input type="radio"/> Cross Street(s) _____ <input type="radio"/> Location Note _____ 2.6 WORK DESCRIPTION <input type="radio"/> _____ _____ _____ _____ _____ _____																						
2.7 WORK DRAWING <input type="radio"/> Sketch (included under App Sec 2.15) <input type="radio"/> Oversize Plan Attached <input type="radio"/> Traffic Plan Attached <input type="radio"/> _____ _____ _____	2.8a DRAIN LAYER LICENSE <u>Water/Drainage Work ONLY (Required Info)</u> <input type="radio"/> Need to Obtain <input type="radio"/> Have Existing License License No _____ Expire Date _____ / _____ / _____ 2.8b WATER TAP WO (DPW obtained) # _____	2.9 GRANT OF LOCATION <u>Utility Company ONLY</u> New Easement and/or Facility Extension <input type="radio"/> (YES) <input type="radio"/> (NO) 2.10 UTILITY WO INFORMATION Company _____ # _____																					
2.11 WORK CATEGORY/TYPE <input type="radio"/> Scheduled <input type="radio"/> Emergency <input type="radio"/> Demo Building-C/C Services <input type="radio"/> New Install <input type="radio"/> Retire Exist & Relay New <input type="radio"/> Repair Existing <input type="radio"/> Work Zone/Obstruction <input type="radio"/> Other _____ _____ _____ _____	2.12 SURFACE CUTS/OPENINGS <table border="1"> <thead> <tr> <th>Number</th> <th>Cut Sizes (LxW)</th> <th>Overall SF</th> </tr> </thead> <tbody> <tr> <td>Street _____</td> <td>_____ x _____</td> <td>= _____</td> </tr> <tr> <td>Sidewalk _____</td> <td>_____ x _____</td> <td>= _____</td> </tr> <tr> <td>Boring _____</td> <td>_____ x _____</td> <td>= _____</td> </tr> <tr> <td>Pole _____</td> <td>_____ x _____</td> <td>= _____</td> </tr> <tr> <td>Other _____</td> <td>_____ x _____</td> <td>= _____</td> </tr> <tr> <td colspan="2">TOTAL # CUTS _____</td> <td>TOTAL SF _____</td> </tr> </tbody> </table>	Number	Cut Sizes (LxW)	Overall SF	Street _____	_____ x _____	= _____	Sidewalk _____	_____ x _____	= _____	Boring _____	_____ x _____	= _____	Pole _____	_____ x _____	= _____	Other _____	_____ x _____	= _____	TOTAL # CUTS _____		TOTAL SF _____	2.13 WORK WINDOW REQUEST Standard 30 Day Duration SOP Coverage <input type="radio"/> (YES) <input type="radio"/> (NO) ID Below 60 Day 90 Day 120 Day _____ Initial Schedule Projection Start Date _____ End Date _____
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2.14 CONTACT INFORMATION CONTRACTOR and PROPERTY OWNER (Property Owner if applicable) <table border="1"> <thead> <tr> <th colspan="2">CONTRACTOR</th> <th>PROPERTY OWNER</th> </tr> </thead> <tbody> <tr> <td><input type="radio"/> Company Name _____</td> <td>_____</td> <td>_____</td> </tr> <tr> <td><input type="radio"/> Contact Person _____</td> <td>_____</td> <td>_____</td> </tr> <tr> <td><input type="radio"/> Address _____</td> <td>_____</td> <td>_____</td> </tr> <tr> <td><input type="radio"/> Town/State/Zip _____</td> <td>_____</td> <td>_____</td> </tr> <tr> <td><input type="radio"/> Telephone/Cell _____</td> <td>_____</td> <td>_____</td> </tr> <tr> <td><input type="radio"/> Email _____</td> <td>_____</td> <td>_____</td> </tr> </tbody> </table>			CONTRACTOR		PROPERTY OWNER	<input type="radio"/> Company Name _____	_____	_____	<input type="radio"/> Contact Person _____	_____	_____	<input type="radio"/> Address _____	_____	_____	<input type="radio"/> Town/State/Zip _____	_____	_____	<input type="radio"/> Telephone/Cell _____	_____	_____	<input type="radio"/> Email _____	_____	_____
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Section 2b – Work Scope Detail Drawing

COMPLETED BY APPLICANT

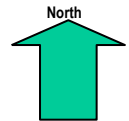
To avoid permit rejection or delays the Applicant should reference the **Application Submittal Instructions and Checklist** guidelines to ensure completion of the required drawing level and information content necessary to process the application request.

The Detail Drawing can be supplied using the area below or by attaching a self generated drawing sheet that **must** contain a title box, scale, company name, address/location, key, a north arrow, **outlined limits/dimension size shown for all proposed surface openings including the TOTAL SF of work openings**, driveway resurfacing or overlays, etc. **NO EXCEPTIONS.**

2.15 DETAIL DRAWING

(BELOW)

(ATTACHED)

☐☐

2.16 SCALE 1" = _____ Not to Scale	2.17 APPLICANT/COMPANY NAME _____	2.18 WORK SITE ADDRESS/LOCATION _____	2.19 KEY (any symbol or notes) (Example) Limit of Surface Cut
Applicants Signature: _____		Date: _____	◦ Check if Applicant is Excavator ◦ Check if Applicant is Owner
Owner's Signature (if different): _____		Date: _____	
Street Opening Location: _____		Date: _____	
Permit Approved By: _____		Date: _____	Permit Expiration Date: _____
Permit Number: _____		Remit Fee Amount: _____	