

**CITY OF HAMMOND**  
**PAVING OF PUBLIC ROW PERMIT APPLICATION**

**FILING DATE:** \_\_\_ \ \_\_\_ \ \_\_\_ **PERMIT#** \_\_\_\_\_

**APPLICANT NAME:** \_\_\_\_\_ Business Owner      Manager  
First Name                      MI                      Last Name

COMPANY NAME: \_\_\_\_\_

APPLICANT MAILING ADDRESS: \_\_\_\_\_  
Street or PO Box Number                      City                      State                      Zip

APPLICANT PHONE: (\_\_\_\_\_) \_\_\_\_\_ FAX: (\_\_\_\_\_) \_\_\_\_\_

**PARCEL#** \_\_\_\_\_ **(PLEASE VERIFY PARCEL ADDRESS & # W/GIS DEPT.)**

**SITE (PHYSICAL) LOCATION:** \_\_\_\_\_  
Street Address Number & Street Name

**PROPERTY OWNER NAME:** \_\_\_\_\_  
(If different than *Applicant Name* above.)      First Name                      MI                      Last Name

COMPANY NAME: \_\_\_\_\_

Owner Address: \_\_\_\_\_  
Street Name/Street Number                      City                      State                      Zip

Telephone: (\_\_\_\_\_) \_\_\_\_\_ Fax: (\_\_\_\_\_) \_\_\_\_\_

**DIMENSION OF AREA TO BE PAVED:** \_\_\_\_\_

**MATERIALS TO BE USED ON SITE:** \_\_\_\_\_

**WILL DITCH BE COVERED?**  YES       NO  
 If so, drain(s) will need to be provided as per requirements of the Street Department.

**WHO OR WHAT COMPANY WILL DO THIS WORK?** \_\_\_\_\_

**WILL STREET TREES OR ROOTS HAVE TO BE REMOVED?**  YES       NO

**NOTICE: Applicant please read the following and sign below to complete this application.**

1. The City Building Inspector and Street Superintendent must give approval of the areas designated for such use after proper inspection to assure public safety, and must issue a permit for use thereon.
2. All work must be inspected by the Street Department during construction.
3. A Plan or Drawing of the project must be attached to this permit.
4. Paving must be at least 5 ½-inches-thick concrete.

I certify that the above information is true and correct. I agree to abide by all City of Hammond ordinances, rules, and regulations governing the service of food or beverage on City sidewalks.

X _____	_____
<b>APPLICANT SIGNATURE</b>	<b>DATE</b>
<b>APPROVAL:</b>	
_____	_____
<b>BUILDING OFFICIAL</b>	<b>DATE</b>
_____	_____
<b>STREET SUPERINTENDENT</b>	<b>DATE</b>

\*\*\*\*\*FOR OFFICIAL USE\*\*\*\*\*

PERMIT FEE: \$25.00                      CHECK# \_\_\_\_\_                      CASH                      DATE PAID \_\_\_/\_\_\_/\_\_\_