

**CITY OF SIMPSONVILLE**  
**ENCROACHMENT/STREET CUT PERMIT**

LOCATION OF CUT:

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DATE OF CUT: \_\_\_\_\_

CONTRACTOR'S INFORMATION:

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

ADDRESS: \_\_\_\_\_

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PHONE NUMBER: \_\_\_\_\_

CONTACT PERSON: \_\_\_\_\_

PALMETTO UTILITY PROTECTION SERVICES REQUEST # \_\_\_\_\_

AUTHORIZED SIGNATURE OF PUBLIC WORKS OFFICIAL \_\_\_\_\_

JOHN LAUX 864-967-9531

DATE OF APPROVAL TO ISSUE PERMIT \_\_\_\_\_

PLEASE RETURN SIGNED APPLICATION TO CITY HALL FOR ISSUANCE OF PERMIT. DO NOT BEGIN WORK PRIOR TO HAVING THIS FORM SIGNED AND RETURNED. YOU MUST HAVE PERMIT BEFORE BEGINNING JOB OR A PENALTY IN THE AMOUNT OF 100% OF THE PERMIT COST WILL BE DUE AT THE TIME PERMIT IS ISSUED. CALL 967-9531 FOR INSPECTION WHEN JOB IS COMPLETED. YOU MUST HAVE PERMIT NUMBER AND ADDRESS OF JOB FOR INSPECTION.

PERMIT FEE: \$500