



ENCROACHMENT STREET CUT PERMIT APPLICATION

SITE/PROPERTY LOCATION:

Property Address: _____

Tax Map Number: _____

APPLICANT: _____

Mailing Address: _____

City, State, Zip: _____

Phone Number: _____

E-mail Address: _____

PROPERTY OWNER (if different from Applicant): _____

Mailing Address: _____

City, State, Zip: _____

Phone Number: _____

E-mail Address: _____

Date of cut/work: _____

Palmetto Utility Protection Services Request #: _____

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- A site plan indicating the proposed work must be submitted with the application.
 - Return signed application to Simpsonville City Hall for the issuance of the permit.
 - No work is to be started prior to obtaining this permit.
 - Work started without a permit will be fined 100% of the permit cost, due at the time the permit is issued.
 - Permit fee: \$500
 - Call 864-967-9531 for inspection upon completion

*Staff reserves the right to request additional information and/or materials as necessary

I do hereby certify as property owner/authorized agent that the information shown on this application and any attached forms and/or plans is correct.

Signature

Printed Name

Date

FOR CITY STAFF USE ONLY

Date Received: _____ By: _____ Comments: _____

Initial

Date

Public Works Review

Planning & Zoning Review

☐ **APPROVED** (☐ with conditions) ☐ **DENIED**