Allegheny County

WORK LOCATION: _____

ADDRESS / ROAD NAME: _____

MUNICIPALITY: _____

UTILITY SKETCH

HOP PERMIT

DEPT. USE ONLY:

APPLICANT _____ APPLICANT ADDRESS _____ APPLICANT PH # _____

WORKSITE CONTACT PERSON _____ Phone: _____ Email: _____

MEDIA RELATIONS CONTACT – Name _____ Phone: _____ Email: _____

PURPOSE OF WORK OPERATIONS _____

NUMBER OF OPENINGS_____ SIZE OF OPENING(S) _____ **(NEATLY SKETCH BELOW)**

INDICATE DISTANCE AND DIRECTION TO NEAREST INTERSECTION _____ FT. ☐ NORTH ☐ SOUTH ☐ EAST ☐ WEST

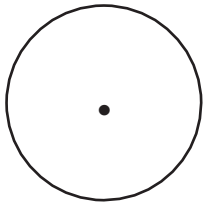
TYPE OF PAVEMENT:

- BITUMINOUS ☐
- STABILIZED ☐
- CONCRETE ☐
- CONCRETE WITH BITUMINOUS SURFACE ☐

TYPE OF SHOULDER:

- BITUMINOUS ☐
- STABILIZED ☐
- OTHER ☐ _____

SHOW NORTH



R/W___ ____ ____ ____ ____ ____ ____ ____ ____ ____ ____ ____ ____ ____

Edge of Pavement

CENTERLINE

ROAD NAME

Edge of Pavement

R/W___ ____ ____ ____ ____ ____ ____ ____ ____ ____ ____ ____ ____ ____