



**CURB CUT
INSTALLATION FORM**

No. _____

OWNERS NAME: _____ PHONE: () _____

MAILING ADDRESS: _____
(No.) (Street) (City/Town)

PROPERTY LOCATION: _____ Map: _____ Lot: _____
(No.) (Street)

MILEAGE FROM NEAREST INTERSECTION: _____ (In Tenths) _____
North East West South of _____ St.

CURBS OPENINGS (installations):		CURB CLOSURES (removal):		
() X ()	+	() X ()	= \$	
<u>cost of curb p/ft.</u>	<u>length</u>	<u>cost of curb p/ft</u>	<u>length</u>	<u>(total fee)</u>
bituminous \$ 15.00		bituminous \$ 21.00		Account No.
granite \$ 30.00		granite \$ 50.00		
rolled \$ 9.00		rolled \$ 15.00		

Work will be done by: _____ Augusta Public Works Department; _____ Private Contractor: (_____)
Name

90% of the curb cut fee could be returned, provided the work is inspected during construction and found to be completed satisfactorily, inspection of granite curbing is to occur prior to curb backfilling & pavement installation. All is to conform to MDOT Standard Specifications § 609 -Curb.

DRAW A SKETCH OF THE PROPERTY SHOWING WHERE ACTIVITY WILL TAKE PLACE

_____ ENGINEER
_____/_____/_____ DATE _____/_____/_____ DATE OF INSTALLATION