

# CITY OF JEANNETTE CURB CUT PERMIT APPLICATION

110 South Second Street, Jeannette, PA 15644  
724-527-4000

Property Owner Name: \_\_\_\_\_

Applicant Name: \_\_\_\_\_ Application Date: \_\_\_\_\_

Applicant Mailing Address: \_\_\_\_\_

Address of Project: \_\_\_\_\_

Parcel ID: 14-\_\_\_\_-\_\_\_\_-\_\_\_\_-\_\_\_\_ Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Name of Contractor: \_\_\_\_\_ Address of Contractor: \_\_\_\_\_

Phone of Contractor: \_\_\_\_\_ Email of Contractor: \_\_\_\_\_

Curb Cut Width (Ft/In): \_\_\_\_\_ Description of Curb Cut: \_\_\_\_\_

*\*Please provide at least thirty (30) days for review and consideration of your curb cut request\**  
*\*Submit drawings with the application that include dimensions and location(s) of the curb cut(s)\**

The undersigned Property Owner and Applicant hereby apply for Curb Cut Approval to be issued on the basis of the information contained in this application and supporting documents. The Property Owner and Applicant hereby certify that all information and attachments are true and correct. The Property Owner and Applicant are responsible for payment of the curb cut fee as required by City of Jeannette Resolution 22-14. The Property Owner and Applicant are responsible for complying with, following and adhering to all rules and regulations of the City of Jeannette including, but not limited to, the conditions of any permit or approval and the zoning specifications listed in City of Jeannette Zoning Ordinance 17-07. The failure to obtain a permit or to comply, follow, and adhere to all such rules and regulations may result in the Property Owner, Applicant, or Contractor being subject to civil and criminal penalties and fines.

Property Owner Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Applicant Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**\*For questions regarding the Zoning Ordinance, please contact the Code Enforcement Officer at 724-527-4000 Ext. 20\***

**\*Curb cuts submitted to the City will require final review and approval by the City Engineer and the Code Enforcement Officer. No work should be performed until a curb cut approval permit is issued.\***

FOR CITY OFFICIAL USE ONLY

Date Received by City Clerk: \_\_\_\_\_ City Clerk Signature: \_\_\_\_\_

Council Approval Date: \_\_\_\_\_

Payment Due: \$150.00

Check No: \_\_\_\_\_ Amount Paid: \_\_\_\_\_ Date Paid: \_\_\_\_\_