



Village Of Rochester

1 Community Drive Rochester, IL 62563
Incorporated in 1869

Excavation Permit

Applicant Name: _____ Phone: _____

Company Name: _____

Address: _____

On-Site Contact: _____ Phone: _____

Location and purpose of Proposed Excavation: _____

Time/Date of Excavation: _____ thru _____
Time Date Time Date

Bonding Company: _____ Phone: _____

Address: _____

Fees (at \$0.25 per sq ft.) \$ _____
Board Waived: N / Y

Amount of Bond: \$50,000 (Please Attach)
Board Waived: N / Y

References:

Municipality Contact Name

I have read the Village of Rochester Municipal Code §95.065 with regards to excavations. We will comply with the Village of Rochester Code provisions.

Applicant Signature _____ Date _____

[] Approved [] Denied Date: _____

Superintendent _____ Date _____

Village President _____ Date _____