

REQUEST FOR TOWNSHIP SPOIL MATERIAL

Name _____ Date _____
Address _____
City _____ State _____ Zip _____
Telephone # _____ Tax Parcel # _____
Type of Spoil Material to be Dumped _____
Number of Loads Requested _____ Approx. area (sq. ft.) to be disturbed/filled _____
Location Where Spoil Material will be Dumped (Provide Sketch) _____

Delivery Terms and Conditions

1. Township trucks are not allowed to drive off of the driveway or road surface at any time.
2. The truck may dump directly onto or off the edge of the driveway.
3. Overhead wires and trees may prevent dumping if the driver determines that he can not safely unload.
4. No Township equipment will be utilized to spread the material.
5. PA One Call, if required, to be made by homeowner.
6. Property Owner is responsible to obtain all necessary permits
7. Delivery of the spoil materials will be limited to within Lower Saucon Township.
8. No more than two (2) deliveries will be permitted for each request. Additional spoils requests will require a field inspection by the Zoning Officer prior to approval.
9. Residents who wish to pick up spoils material from the Public Works Yard using their own truck must make an appointment with the Public Works Director and will be allowed to pick up the material under the following conditions:
 - a. The resident must complete a damage waiver.
 - b. The charge for loading will be: \$5 for up to 1-ton truck; \$10 for larger single axle (10 ton) trucks; \$20 for 10-wheel or tri-axle dump trucks.
 - c. Payment must be made in a check payable to Lower Saucon Township.

I understand that, while the driver will exercise due care in delivering the materials, Lower Saucon Township will not be held responsible for any property damage which may occur during the delivery operation.

I also agree not to request the removal of the materials at a later date. If area designated for delivery is unsafe or if the delivery could result in possible property damage, it will be at the driver's discretion whether or not to make the delivery.

Signature

Date

Township Internal Use – Do Not Complete

Zoning Office Review Date _____

GIS of Parcel Reviewed Yes No

Dumping in Floodplain Yes No

Grading Plan Required Yes No

Township Manager Approval _____

Signature

Date