



# APPLICATION FOR EXCAVATION PERMIT

**SELLERSVILLE BOROUGH**  
**140 EAST CHURCH STREET**  
**SELLERSVILLE, PA 18960**  
**(215)257-5075**

THE UNDERSIGNED HEREBY APPLIES FOR THE ISSUANCE OF A PERMIT FOR MAKING THE FOLLOWING EXCAVATIONS:

Applicant/Contractor Name: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Phone Number: \_\_\_\_\_ E-Mail Address: \_\_\_\_\_

Purpose of Excavation: \_\_\_\_\_ Number of Excavations: \_\_\_\_\_

Property Address: \_\_\_\_\_

City: \_\_\_\_\_ Zip Code: \_\_\_\_\_ Tax Map Parcel # \_\_\_\_\_

If location cannot be fully described, please submit a plan a separate sheet

Length of Trench: \_\_\_\_\_ Feet      Width: \_\_\_\_\_ Feet      Depth: \_\_\_\_\_ Feet

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Length of Trench: \_\_\_\_\_ Feet      Width: \_\_\_\_\_ Feet      Depth: \_\_\_\_\_ Feet

The actual opening shall not exceed above dimension. If made larger, an additional charge will be made.

Date of Commencement \_\_\_\_\_ Completion \_\_\_\_\_

The Undersigned hereby agrees to abide by all the Terms and Conditions of Ordinance No. 304, approved November 12, 192, under which this application is made the same as herein specifically set forth.

\_\_\_\_\_  
Applicant

\_\_\_\_\_  
Date

2026 Fees:

\$100 Base Fee plus \$10.00 per square yard