



Department of Planning & Development  
 2348 S. Brentwood Blvd., Brentwood, MO 63144  
 314-962-4800/ Fax 314-962-5632  
 www.brentwoodmo.org

Permit #: \_\_\_\_\_

Date Issued: \_\_\_\_\_

**STREET EXCAVATION OR CURB CUT PERMIT**

*Upon authorization, permission is hereby granted subject to permit holder's compliance with all provisions contained in the permit. Work must comply with the approved plans submitted depicting the scope and detail of work and is subject to the notations indicated on the approved plans as listed by the Building Official. Permit is subject to revocation or a stop work order for cause at the discretion of the Building Official.*

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Contractor Address: \_\_\_\_\_ Email: \_\_\_\_\_

To: Install water tap: \_\_\_\_\_ Make sewer connection: \_\_\_\_\_ Install driveway: \_\_\_\_\_ Other: \_\_\_\_\_

Description of work: \_\_\_\_\_

Location of work: \_\_\_\_\_

Estimated start date: \_\_\_\_\_ Estimated completion date: \_\_\_\_\_

Notification shall be given to the Planning and Development Department, 314-962-4800, 24 hours prior to commencing work. When working after hours or on Saturday, Sunday and for holiday emergencies, notify Police Dispatcher at 314-963-8669. Permit to be on job at all times.

Contractor shall refill such excavation or restore, repair or replace all areas affected, in accordance with the conditions established by the City of Brentwood, MO and in accordance with Section 21-41 through 21-46 and 21-76 through 21-81 of the Brentwood City Code and the laws of the State of MO. The work is to be completed within **30 days** from the date of this permit unless the Building Official grants an extension of time.

**ALL CUTS IN CONCRETE STREETS OR SIDEWALKS SHALL REQUIRE A FULL SLAB REPLACEMENT.**

**\*Must call 314-962-4800 for inspection upon completion. Surety refunds are subject to approved final inspection.**

===== DO NOT WRITE BELOW THIS LINE =====

**Fees:**

Deposit: \$ \_\_\_\_\_  
 Earth Excav. Fee: \$ \_\_\_\_\_  
 Asphalt: \$ \_\_\_\_\_  
 Concrete: \$ \_\_\_\_\_  
 Size charge @\$1/sf.(>8) \$ \_\_\_\_\_  
 Inspection: \$ \_\_\_\_\_  
 Total Fees: \$ \_\_\_\_\_

Issued By: \_\_\_\_\_  
 Date: \_\_\_\_\_

FINAL INSPECTION AND REFUND APPROVAL	
Inspected by:	_____
Date:	_____
Refund Approved:	_____
Date:	_____