



APPLICATION FOR EXCAVATION PERMIT

Application Date: _____

*Permit #: _____

The undersigned hereby makes application to Board of Public Works and Safety of the City of Delphi, Carroll County, Indiana, pursuant to the provisions of Ordinance 99-5 of said City, for a permit to excavate as follows:

1. Location: _____
2. Purpose: _____
3. Approximate Size : _____
4. Property Owner: _____
5. Start/Completion Dates: _____
6. Applicant Name & Company Name: _____
7. Emergency Contact Number: _____

The undersigned represents that all provisions of said Ordinance 99-5 shall be complied with to the satisfaction of said Board or its duly authorized agent.

Applicant Signature: _____ Date: _____

Permit Fee	\$25
Residential Excavation Deposit	\$250
Commercial Excavation Deposit	\$500
Amount Paid: _____	

*OFFICE USE ONLY
Date Permit Approved: ____ / ____ /2025
Excavation Repair Cost: _____
Amount of Deposit Retained: _____