

**TOWN OF HACKETTSTOWN
215 STIGER STREET
HACKETTSTOWN, NJ 07840**

**SHADE TREE COMMISSION
APPLICATION FOR SIDEWALK REPAIR
FOLLOWING ROOT REMOVAL**

APPLICANT _____ PHONE # _____

ADDRESS _____

LOT _____ BLOCK _____

OWNER OF PROPERTY, IF OTHER THAN APPLICANT _____

LOCATION AND KIND OF WORK TO BE DONE (show on diagram below):

TYPE OF EXISTING SIDEWALK: ___ SLATE ___ CONCRETE ___ ASPHALT

REMARKS _____

DIAGRAM:

I, property owner of above noted property, will be responsible for replacement of the above mentioned sidewalk in a timely manner.

Homeowner Signature _____

**NO FEE REQUIRED TO REPLACE SIDEWALK BUT NOTIFICATION AND
INSPECTION BY D.P.W. SUPERINTENDENT IS MANDATORY.**

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APPLICATION APPROVED _____ DATE _____

FORWARDED TO SHADE TREE COMMISSION _____

WORK SATISFACTORILY COMPLETED _____

Streets Superintendent