

CITY OF GRANDVIEW HEIGHTS, OHIO
SERVICE DEPARTMENT
1260 McKinley Avenue
COLUMBUS OHIO 43224
(614) 488-4728 phone
(614) 481-6222 fax

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|------------------|
| office use only |
| PERMIT NO. _____ |
| DATE: _____ |

CURB CUT PERMIT

Name of Applicant Phone Number

Address of Applicant

Location of Work Date of Work

$\frac{\$500}{\text{Amount of Bond}} + \frac{\$4.00 \text{ per lineal foot}}{\text{}} = \frac{\text{TOTAL BOND}^*}{\text{}}$

$\frac{\text{Amount of Fee}}{\text{}} \frac{\$25.00 \text{ per Opening or Cut}}{\text{}} = \frac{\text{TOTAL FEE}^*}{\text{}}$

Having posted (in cash or certified check) the required bond with, and having paid the required fee to, the City of Grandview Heights, Ohio; you are hereby permitted to cut the curb in accordance to instruction by the Director of Service as to type and method of replacement. Aforementioned Bond shall be returned when approved by the Director of Service, as per Ordinance No. 14-2007.

Director of Service

Date Inspected

Mayor/ Director of Public Service

Date Bond Returned

** Separate checks are required for Bond and Fee.*