



MUNICIPALITY of MURRYSVILLE

4100 Sardis Road • Murrysville, PA 15668
Phone: (724) 327-2100 • Fax: (724) 327-2881

Geophysical/Seismic Testing Permit Application

1. Applicant's Name _____

2. Applicant's Address _____

3. Types of explosives or geophysical methods of exploration.

4. Is a map designating the testing area and showing the location of all points of use and the energy source to be used at each point included with this application? Yes ___ No ___

5. Has a traffic control plan for any operations or testing that will impede traffic on a public right of way been included with this application? Yes ___ No ___

6. Proof of insurance. Yes ___ No ___

7. Non-refundable fee of \$500.00. Yes ___ No ___

8. Name of site engineer. _____

Engineer's Contact Information

Company _____

Telephone # _____

Email _____

9. Sample of property owner notification letter and mailing list. Yes ___ No ___

10. Sample of newspaper notification. Yes ___ No ___

11. Have you secured all necessary utility and water well maps? Yes ___ No ___

12. Will you use any vehicles in excess of 20,000 pounds? Yes ___ No ___

Signed _____

Print Name _____

Telephone Number _____



Official Use

Date Received _____

Date Reviewed _____

Reviewer _____

Approved Yes ___ No ___