## New Jersey Turnpike Authority APPLICATION FORM --- LICENSE TO CROSS

## Applicant Information: Business/Agency: Contact Person: Contact Telephone No.: Tax ID No.: Work Information: Location of work: \_\_\_\_\_\_(Municipality) (County) Roadway: Turnpike: (Milepost) If roadway and milepost are unknown, attach a location plan which can show the work location within 100' +/-. Description of Work: Purpose of Work: Title and date of drawings prepared for this project: Scheduling Information: Anticipated start of construction: (Month) (Year) Anticipated duration of project: Application Date: Signature:\_\_\_\_ Title: