



VILLAGE OF
PORT CHESTER
10 Pearl Street, Port Chester, NY 10573

(914) 939-5202
Fax: (914) 937-3169

PAY TELEPHONE APPLICATION

\$200.00 per Pay Telephone

APPLICANT INFORMATION (for one (1) pay phone)

Company Name _____

Location of proposed telephone: _____

Contact Person _____

Address _____

Phone _____

Contact person and phone number available in an emergency: _____

Phone number of proposed telephone: _____

Authorized to do business in the State of New York: Yes _____ No _____

Attached is a copy of a plan of the telephone describing the size, location, equipment, means of installation and cabling:
Yes _____ No _____

Attached is a certificate of insurance, naming the Village of Port Chester as an additional insured, in the amount of \$2,000,000.00 personal injury and \$300,000 property damages: Yes _____ No _____

Is the pay phone:

- | | | |
|--|---|---|
| 1. Within five (5) feet of any marked crosswalk? | Y | N |
| 2. Within ten (10) feet of a street corner without a marked crosswalk? | Y | N |
| 3. Within fifteen (15) feet of any fire hydrant? | Y | N |
| 4. Within five (5) feet of any driveway? | Y | N |
| 5. Within three (3) feet of any public area improved with flowers or other landscaping? | Y | N |
| 6. At any location where the clear space for the passageway of pedestrians is reduced to less than four feet? | Y | N |
| 7. On any access ramp for disabled persons? | Y | N |
| 8. Adjacent to any portion of a roadway designated as a fire lane? | Y | N |
| 9. Within three (3) feet of a water or gas valve, manhole, or other appurtenance? | Y | N |
| 10. Within three (3) feet of any building unless written permission is secured from the property owner and filed with the application? | Y | N |
| 11. Within ten (10) feet of any entrance to a residence, store or public building? | Y | N |
| 12. Within any R-5, R-7, R-20 and R2F Zoning Districts? | Y | N |

DEFENSE AND INDEMNIFICATION

The applicant hereby agrees to defend, hold harmless and indemnify the Village of Port Chester, New York, its agents, employees and/or servants, for any wrongful or negligent act or omission arising out of the installation, keeping or maintenance or the pay telephone above-referenced.

Dated: _____ Signed _____ Title _____

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VILLAGE ATTORNY - If application is disapproved please attach letter of disapproval.

Approved _____ Disapproved _____ Signed _____ Date _____

DPW – If application is disapproved please attach letter of disapproval.

Approved _____ Disapproved _____ Signed _____ Date _____

FEE: _____

DATE: _____

PERMIT #: _____