



APPLICATION FOR EXCAVATION PERMIT

To: DIRECTOR PHYSICAL PLANNING
Kampala Capital City Authority

PLOT No.: BLOCK No.:

STREET. DIVISION:

APPLICANT'S NAME: SIGNATURE:.....

TELEPHONE CONTACT:.....

APPLICANT'S PHYSICAL ADDRESS:.....

DATE:

I/we hereby apply for permission to carry out excavations as described below.

Description of proposed excavations works (Attach comments on a separate page if necessary):

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FOR KCCA OFFICIAL USE ONLY

Approved

Deferred-Reason

Denied-Reason.....

(Attach comments on a separate page where necessary)

Please note that this permit is temporary, KCCA reserves the right to revoke it, at any time without prior notice, in case of breach of any of the provisions in the Physical Planning Act, Town and country regulations, Public Health Act and building rules or any other law.

Name.....Signature.....

Title.....Date.....