

UTILITY PERMIT APPLICATION

Construct / Operate / Maintain Utilities Within Town Right-of-Way

APPLICANT/COMPANY INFORMATION

Applicant/Company Name:		
Current address:		
City:	State:	ZIP Code:
Phone:	Email:	
Plans prepared by:		Phone:

LOCATION INFORMATION

Name of Town Road(s):
Closest Intersection:

ADDITIONAL INFORMATION

Annual Service Connection Permit?	Yes / No	Utility Work Order #:
Fee Required?	Yes / No	Amount Due: \$
Certificate of Insurance?	Yes / No	<input type="checkbox"/> Security Deposit Check No.

DESCRIPTION OF PROPOSED WORK

Utility Type:	<input type="checkbox"/> Electric	<input type="checkbox"/> Gas/Petroleum	<input type="checkbox"/> Communications	<input type="checkbox"/> Water	<input type="checkbox"/> Sanitary Sewer
	<input type="checkbox"/> Private Line	<input type="checkbox"/> Transmission	<input type="checkbox"/> Distribution	<input type="checkbox"/> Service	Facility Size/Capacity: _____

Orientation:	<input type="checkbox"/> Overhead	<input type="checkbox"/> Underground	<input type="checkbox"/> Parallel to Road Centerline	<input type="checkbox"/> Town Road	<input type="checkbox"/> Tunnel
	<input type="checkbox"/> Bridge Attachment				

Work Type:	<input type="checkbox"/> New Construction	<input type="checkbox"/> Improve/Repair Existing	<input type="checkbox"/> Maintenance
	<input type="checkbox"/> Removal	<input type="checkbox"/> Abandon in Place	

Construction Methods	<input type="checkbox"/> Plow	<input type="checkbox"/> Trench	<input type="checkbox"/> Bore	<input type="checkbox"/> Cased
	<input type="checkbox"/> Suspend on Poles/Towers		<input type="checkbox"/> Open Cut Road	
<input type="checkbox"/> Tree Cutting/Removal	<input type="checkbox"/> Chemical Treatment of Trees/Brush	<input type="checkbox"/> Erosion Control Measures Taken	Yes / No	

ALL OTHER INFORMATION

Any/All Other Information:	
Name of Utility Representative Responsible for Construction:	Phone:
Estimated Starting Date:	Estimated Completion / Restoration Date:

SIGNATURES

The applicant understands and agrees that the permitted work shall comply with all permit provisions and conditions of the Utility Accommodation Policy of the above-named Town in effect at the time of this application, and with any special provisions listed below or attached hereto, and any all plans, details, or notes attached hereto and made a part thereof.

Signature of applicant:	Date:
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FOR OFFICE USE ONLY

ISSUING JURISDICTION

The foregoing application is hereby approved and permit issued by the Permit Authority subject to full compliance by the Applicant with all provisions and conditions in the Utility Accommodation Policy of the above-named Town including the Indemnification as included in 96.03 of the WCHA Utility Accommodation Policy in effect on the date of this application.

Other Permit Information Attached: Yes / No

FEES:	PERMIT ISSUED BY:
Fee Received: \$ _____	Name: _____ Title: _____
Check #: _____	Date: _____ Telephone: _____
Date Issued: _____	
Road Project #: _____	
Permit #: _____	

Note: If submitting permits electronically – please email them to permit@townoflawrence.org