



Right of Way Permit Application

PROP. OWNER _____ STRAP # _____

JOB ADDRESS _____ DO# _____

MAIL ADDRESS (if different) _____

PHONE# _____ EMAIL _____

CONTRACTOR _____ ADDRESS _____

PHONE# _____ E-MAIL _____

CONTACT PERSON _____ LICENSE# _____

PERMIT REQUESTED _____

PROPOSED USE _____ EST.SQ.FT. _____ CONST VALUE \$ _____

For the Purpose of Construction or Installation

Overhead Utility			
<input type="checkbox"/> Cable TV	<input type="checkbox"/> Power Line	<input type="checkbox"/> Telephone Line	<input type="checkbox"/> Other _____
Underground Utility			
<input type="checkbox"/> Cable TV	<input type="checkbox"/> Jack & Bore	<input type="checkbox"/> Power Line	<input type="checkbox"/> Other _____
<input type="checkbox"/> Sewer Line	<input type="checkbox"/> Telephone Line	<input type="checkbox"/> Water Line	
Roadway			
<input type="checkbox"/> Widening	<input type="checkbox"/> Open Cut	<input type="checkbox"/> Drainage Culvert	<input type="checkbox"/> Other _____
<input type="checkbox"/> Catch Basin	(Justification required)		

Repairs (Explain) _____

Maintenance of Traffic Plan if needed (Explain) _____

Additional Information _____
