



# Right-of-Way Permit Application

<p><b>NOTICE:</b></p> <p>NO work shall be conducted on <i>Saturday, Sunday, or Holidays</i></p> <p>NO work shall begin before <i>8:00am</i> or after <i>4:30pm</i> Monday through <i>Friday</i>.</p> <p>Contractors shall notify the Public Works Department <b>24-hours before work begins.</b></p>	<p><b>APPLICANT IS RESPONSIBLE TO CALL FOR UNDERGROUND LOCATES:</b></p> <p><b>1-800-424-5555</b></p>	<p><b>ALL WORK MUST BE INSPECTED PRIOR TO COVER OR BACKFILLING.</b></p> <p><b>UPON COMPLETION THE JOB MUST HAVE A FINAL INSPECTION AND ACCEPTANCE BY THE PUBLIC WORKS DIRECTOR.</b></p> <p><b>SUFFICIENT BARRICADES AND LIGHTS WILL BE PUT IN PLACE TO PROTECT THE PUBLIC</b></p>
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**Checklist for a Right-of-Way Permit Application:** *the following must be included with your application.*

- Completed Application:** *incomplete applications will not be accepted.*
- Application Fee:** *\$50.00 + \$1.00 per linear foot.*
- Site Plan**
  - o Location of all existing and proposed facilities and any other important information pertaining to the proposed project. All patches in roadway must be repaired at no less than a 2' or larger patch than the original cut and any repairs in path of wheel travel will require a complete lane repair, no exceptions permitted.
  - o Location and dimensions of all existing buildings, loading platforms or off-street parking facilities being served or to be served by the new or repaired construction.
  - o Property dimensions of abutting properties.

### APPLICANT INFORMATION

Applicant    Contractor    Authorized Agent

Name(s): \_\_\_\_\_

Business Name (if applicable): \_\_\_\_\_

Mailing Address: \_\_\_\_\_ City/St/Zip: \_\_\_\_\_

Phone #: \_\_\_\_\_ Email: \_\_\_\_\_

### PROJECT INFORMATION

Site Address: \_\_\_\_\_ Project Name: \_\_\_\_\_

Permission is hereby granted to perform the following work: \_\_\_\_\_

Project to be completed on or before: \_\_\_\_\_

I certify that I am either the current legal owner of this property or their authorized representative. With this document, I take full responsibility for the lawful action that this document allows. I agree to indemnify and hold the City of Winlock harmless from any and all loss or damages done to any person or property which may arise from the construction operations covered by this permit. I affirm that all the information and documents provided with this application are true and accurate to the best of my knowledge.

\_\_\_\_\_  
Signature of owner/applicant

FOR OFFICIAL USE ONLY		
Date Received: _____	Received By: _____	
Application Fee: _____	Rct. #: _____	Date Paid: _____
Linear Footage Fee: _____	Rct. #: _____	Date Paid: _____
Additional Permits: _____		
Notes/Comments: _____		
_____		
_____		

PROJECT **APPROVAL DATE:** \_\_\_\_\_

Permit #: \_\_\_\_\_

City Official Signature: \_\_\_\_\_

Title: \_\_\_\_\_

**FINAL** INSPECTION DATE: \_\_\_\_\_

City Official Signature: \_\_\_\_\_

Title: \_\_\_\_\_