

RIGHT OF WAY PERMIT

APPLICATION

125 Pine Cone Road North
PO Box 140
Sartell, MN 56377
PHONE: 320-253-2171
FAX: 320-253-3337

City of



PART 1:

APPLICANT _____
PHONE _____ FAX _____ EMAIL _____
ADDRESS _____
CITY _____ STATE _____ ZIP _____
SUBCONTRACTOR NAME: _____ PHONE _____

1. Permits will be issued only to contractors bonded and insured in accordance with City Ordinance or to public utility corporations licensed in accordance with City Ordinance, and only after such contractor or utility has properly registered with the City.

2. Purpose of Right of Way Permit:

- Water
- Sanitary Sewer
- Power line or service
- Telephone line or service
- Gas main or service
- Cable TV
- Other (describe)

3. Location of Construction

- a. Will street be disturbed? Yes No
- b. If so, surface in place is: _____
- c. Method of installation:
 - Open trench
 - Jacking
 - Boring
 - Plowing
 - Overhead

Describe lane closures or detours, if any requested: _____

4. Anticipated Start Date: _____ Restoration Completion Date: _____

5. **Please attach additional plan details for this project, including project location address and mapping.** Maps may be submitted in an electronic format for GIS mapping in compliance with MN Rules 7819.4000 to 7819.41000.

6. The applicant hereby states that applicant is familiar with the provisions of the City Right of Way Ordinance, has read this entire application (**including back of this form**) and agrees to the conditions stated therein, and will comply with Ordinance provisions and any requirements of the City Engineer or Public Works Director.

APPLICANT:

By: _____
Print Name: _____ Title: _____

If any utility is hit, please contact City Hall immediately!
CITY OF SARTELL, MINNESOTA (320) 253-2171

WHITE - APPLICANT

CANARY - PUBLIC WORKS DIRECTOR

PINK - FILE

CITY OF SARTELL

PART 2 RIGHT OF WAY PERMIT

Permit No: _____

Permittee: _____

PERMIT FEES

Excavation Fee: Hole + 1st 100 feet x \$35 Fees = \$35

Trench < 400 feet: _____ Lineal feet x \$35 per 100 ft Fees = _____

Trench > 400 feet: _____ Lineal feet x \$25 per 100 ft Fees = _____

Obstruction Fee x \$50 Fees = \$50

Overhead _____ Lineal feet x \$.05 Fees = _____

Degradation Costs Total = _____

Costs in excess of above estimates will be billed and due within 30 days

Fees Received: _____

APPROVED BY CITY:

Print Name: _____

Title: _____

CONDITIONS OF PERMIT (The City Inspector is authorized to impose reasonable conditions upon the performance of any work involving the Right of Way, including standards for installations or construction in the Right of Way.)

1. _____

2. _____

3. _____

WORK COMPLETED SATISFACTORILY:

City Representative: _____

COMMENTS: _____

WHITE - APPLICANT

CANARY - PUBLIC WORKS DIRECTOR

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