# CITY OF LAKE WORTH RIGHT-OF-WAY EXCAVATION PERMIT APPLICATION

Application Date:	Permit Number:
	(to be filled in by clerk)

Facility Owner/Contact Name:					
Address:		City:		State:	Zip:
Phone:	Fax:		Em	ail:	

#### CONTRACTOR INFORMATION

Contractor:		Contact Name:			
Address:		City:		State:	Zip:
Phone:	Mobile:		Em	ail:	

Location(s) of Work:	
Date(s) of Work:	Time(s) of Work:
Description/Type of Work:	

## **REQUIREMENTS/TERMS OF PERMIT**

Applicant for permit must be the owner/authorized representative of the facilities and provide the following information in order for permit to be approved:

- 1) Any contractor performing work in the right-of-way on behalf of the facility owner must provide required information and obtain a right-of-way permit at least 10 days prior to work being started.
- 2) Facility Owner must have current registration on file before permit will be issued.
- 3) Contractor will need to provide a plan/scope of work to be performed.

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4) Facility owner must provide any additional information that the Director of Public Works may deem necessary.

#### , A REPRESENTATIVE FOR

Ι\_\_\_\_\_ , HEREBY STATE THAT MY COMPANY HAS COLLECTED ALL AVAILABLE PLANS FOR EXISTING CITY UNDERGROUND FACILITIES AND OTHER PUBLIC AND PRIVATE UTILITIES AND HAVE INCLUDED THOSE FACILITIES AND UTILITIES IN THE DESIGN PLAN I AM SUBMITTING, AND THEY SHOW NO CONFLICT. I ALSO UNDERSTAND THAT I WILL PERFORM FILED VERIFICATIONS AS NECESSARY DURING CONSTRUCTION TO LOCATE ALL CITY AND OTHER EXISTING UNDERGROUND FACILITIES.

Signature of Representative

Date

## OFFICE USE ONLY:

Date Approved:\_\_\_\_\_\_Date Expires:\_\_\_\_\_

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