

## **RIGHT-OF-WAY PERMIT APPLICATION**

## Allow a minimum of 5 business days for permit processing from date of arrival.

Applicant is responsible for all locations and Gopher State One Calls including registration of new utilities. Please describe and check all that apply. Attah two scale drawings of project area. The drawing needs to show all existing and proposed right-of-way, curb, sidewalk, trails, and above and below ground facilities or appurtenances and poles.

Project Description:								
Date:		Co. I	Co. Reference #:					
Applicant/Utility Owner:		Contact Person:						
Address:		City:	City: S		Zip:			
Email:		Phor	ne:					
Contractor Performing	ng Work							
Company:		Na	me:					
Address:		Cit	City: State:		Zip:			
Email:		Pho	one:					
Location:								
Type of Work:	Cable TV	Electric	Gas	R	Repair			
Telecom	New	Replacement	Service	A	Abandon			
Underground	Street Light	Aerial	Driveway	(	Other			
Estimated Start Date:			Estimated Completion Date:					

Type of Surface to be Disturbed:		Blvd.	Sidewalk	Easement		
Bituminous	Concrete	Gravel	Other			
Method of Installati	ion:	Trench	Plow	Directional Bore		
Backhoe	Hand Dig	Pneumatic Gopher Other				
Material Used:						
Size and type of pipe	e, conduit or cab	le:				
Distance from curb o	or centerline:					
Voltage or pressure:		Length:		Depth from surface:		
Detour of Traffic:	No:	Yes:	Traffic control must comply with MMUCD			
	·					
Restoration Planned	d:	1	Motorized Tamper	Machine Formed Curb		
Hand formed Cur	b/Sidewalk with	Forms	Sodding with 6" Topsoil	Bit. Paving		
Seeding with 6" T	opsoil		Other			
<b>OFFICE USE ONLY:</b> PAdministration Fee (	Total:					
				Albertville City Code. By executing this itions and requirements of the Albertville		
ocate and avoid all u	tilities including s <sub>l</sub>	orinklers and storm	sewers. Bore all roads ar	Restore all disturbed area "in kind". nd driveways. et City approval prior to construction.		
Signature:			Date:			
Submit complete	d application and	l map to: <u>maegh</u> a	inb@albertvillemn.gov	Phone: 763.497.3384 x103		
All	ow a minimum d		ce Use Only for permit processing j	from date of arrival.		
Date Received:	Appr	oved by:	Date Approve	Date Approved:		
Permit Number:	Final	Total:	Paid:	Paid:		