

CITY OF WASECA ENGINEERING DEPARTMENT RIGHT-OF-WAY PERMIT APPLICATION

TYPE OF WORK: (Check all that apply)	APPLICANT INFORMATION (Please print below)	
□ OBSTRUCTION: Length: feet Type:	ADDRESS/LOCATION (Attach plans or sketch on reverse if applicable):	
□ SIDEWALK/TRAIL/SHARED USE PATH: Length: feet	APPLICANT/CONTRACTOR:	
Width: feet	SUBCONTRATOR(S):	
□ DRIVEWAY APPROACH:	CONTACT NAME(S):	
Driveway Width: feet		
+ Flare Width X 2: feet = Total Curb Cut Length: feet	24-HOUR PHONE:	
□ DRIVEWAY CULVERT:	START DATE:	END DATE:
Length: feet / Diameter: inches		
Pipe Material:	THIS PERMIT IS SUBJECT TO THE FOLLOWING CONDITIONS:	
☐ STREET REPAIRS: (Check all that apply)	1. The permit is NULL & VOID if work has not begun within 60 DAYS of permit approval. 2. Except for emergencies, permits will not be granted between Nov. 1st and April 1st.	
☐ Curb and Gutter - Length: feet	3. All work, including restoration, must be completed before the seasonal restriction dates or within <u>90 DAYS</u> . Except when an extension is granted, work beyond the seasonal restriction or permit end date are subject to a <u>fee penalty of \$50.00/day</u> .	
☐ Concrete Pavement - Area: square yards		
☐ Bituminous Pavement - Area: square yards	4. Proof of a minimum \$1,000,000 liability policy is required of all contractors. 5. Permit holder must provide an emergency contact name and a 7-day, 24-hour phone	
☐ Composite Pavement - Area: square yards	number. Inability to make contact in the event of an emergency may result in penalties,	
□ <u>UTILITY WORK:</u> (Check all that apply)	fines, revocation of permits, and/or back charges as a result of any damages. 6. Permit holder is responsible for notifying, locating (Gopher State One Call), and	
□ Excavation	protecting all public utilities within the work area. Any damage to public or private property	
Depth: feet / Length: feet	will be the sole responsibility of the permit holder. Any required alterations, improvements, or relocations shall be at the permittee's expense.	
□ Directional Boring	7. All work shall comply with current applicable City, State, and Federal standards, codes,	
Length: feet	and policies; and be subject to inspection by City staff at any time. Work performed without City staff inspection may not be accepted and may result in fines and/or full to partial repairs	
Other:	at the expense of the permit holder.	ray result in filles and/or full to partial repairs
Work is related to: ☐ Sanitary Sewer ☐ Natural Gas	8. The City shall be notified <u>at least 24 hours prior to</u> the start and completion of any work, the beginning and end of any street or lane closures, and required City staff inspections.	
□ Storm Sewer □ Water	 Street and lane closures shall follow current Minnesota Manual on Uniform Traffic Control Devices (MN MUTCD) requirements, require City Engineer approval, and must be in accordance with an approved traffic control plan. Access to private properties and all public utilities must be maintained at all times. It is understood and agreed that the rights and privileges herein are granted to the 	
☐ Communications ☐ Electric/Traffic Signals		
☐ Other:		
	extent of the City's right, title, and interest in the	
□ OTHER:	permit holder. The permit holder will assume harmless the City from and against all loss, dam	
	out of the exercise or attempted exercise of the	e aforesaid rights and privileges.
	12. I hereby state that all information is correct this permit. I also agree to be bound by the pro-	_
	regulations of the Waseca Municipal Code or a	ny other government agency restrictions or
	regulations that may be imposed by the City of violation of these regulations or safety require termination of activity, and denial of future per	ments may cause revocation of the permit,
STREET/LANE/SIDEWALK CLOSURE: ☐ YES ☐ NO (If yes, provide a traffic/pedestrian control plan)	, and action of state per	
COUNTY/MnDOT PERMIT REQUIRED: ☐ YES ☐ NO (If yes, provide a copy of the approved permit)	Signature of Applicant/Applicant's Agent	Date



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BELOW FOR CITY OF WASECA OFFICE USE ONLY			
Date Permit Received:	APPROVED:		
PROOF OF INSURANCE:	Engineering Dept. Signature	 Date	
EXPIRATION DATE:	Engineering Dept. Signature	Date	
INSPECTION REQUIRED:	INSPECTED & ACCEPTED BY:		
Permit Fee: \$			
Date Paid:	Engineering Dept. Signature	Date	
PROJECT SKETCH (if needed):			