

# APPLICATION/PERMIT TO CONSTRUCT AND OPERATE UTILITY FACILITIES ON STREET RIGHT-OF-WAY

Location Description - Quarter section, section, township, range, ect.  
To each copy of the application attach one cop of the sketch showing location

Proposed Work Location  
 Town                       Village                       City  
 Of \_\_\_\_\_  
 County \_\_\_\_\_

**Applicant Name and Address**  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Construction Starting Date \_\_\_\_\_  
 Construction Completion Date \* See Note Below \_\_\_\_\_  
 Applicant Work Order - if any \_\_\_\_\_

Street _____	Utility Facility/Work Type
_____	<input type="checkbox"/> Electric <input type="checkbox"/> Monitoring Well <input type="checkbox"/> Overhead
_____	<input type="checkbox"/> Telephone/Communications <input type="checkbox"/> Gas/Petroleum <input type="checkbox"/> Underground
_____	<input type="checkbox"/> Water <input type="checkbox"/> Chemical Treatment <input type="checkbox"/> Bridge Attachment
	<input type="checkbox"/> Sanitary Sewer <input type="checkbox"/> Tree Cutting/Removal

\* NOTE: If the work described is not completed by the "Completion Date" specified, this permit is null and void, and the work shall not be completed unless authorized through a subsequent permit or an approved time extension.

It is understood and agreed that approval is subject to the applicant's full compliance with the pertinent Statutes, as well as any rules and regulations of other jurisdictional agencies, which may be more restrictive, and with the City of Elkhorn's Policy for the Accommodation of Utilities on Street Right -of-Way, current edition.

Line Owner Notification Telephone Number  
 \_\_\_\_\_

**X**  
 \_\_\_\_\_  
(Authorized Representative)                      (Date)  
 \_\_\_\_\_  
(Title)  
 \_\_\_\_\_  
(Authorized Representative Telephone Number)

City Location and Telephone Number                      **Public Works Recommendation**                      Date Application Received by City

Special Telephone Number  
 \_\_\_\_\_

**X**  
 \_\_\_\_\_  
(Recommendation for Director)                      (Date)

### Division of Streets Permit Approval

Permit Number	Issuance Date

**X**  
 \_\_\_\_\_  
(Approval of Director)                      (Date)