

RIGHT-OF-WAY PERMIT APPLICATION

Application is hereby made to work within the City of Walford roadway right-of-way limits by:

APPLICANT INFORMATION

CONTRACTOR

NAME _____

NAME _____

STREET _____

STREET _____

CITY _____ STATE _____

CITY _____ STATE _____

ZIP _____ PHONE (____) _____

ZIP _____ PHONE (____) _____

HOUSE NUMBER _____

N
W + E SIDE OF ROAD _____ RD and _____ RD
S

Describe work in detail. Attach plan or drawings showing exact location, dimensions, type of installations and details.

Which of the following applies to the work to be done?

- _____ Work will be completed on the shoulder and there will be no obstruction on the pavement.
_____ All or part of one lane of traffic will be impeded during the operation.
_____ All or part of both lanes of traffic will be impeded during the operation.
_____ Other (describe) _____

Work will begin on or about what date? _____ Completed? _____

WORK PROVISIONS

I, the undersigned, understand that the City of Walford assumes no responsibility or liability for the work done under this permit and that all work shall be done at no cost to the City. **All work shall be done, in accordance with the Iowa Statewide Urban Design Standards Manual, the Iowa Manual of Uniform Traffic Control Devices and any supplemental and special provisions deemed necessary or as stated on the permit as special provisions or conditions.** The city engineer/mayor reserves the right to order the removal, reconstruction, relocation, or repair of any work performed under a permit at the owner's expense. The City engineer/mayor reserves the right to appoint an inspector over the work.

I hereby agree to all terms, conditions, and restrictions so far as they apply to work to be done under the permit as issued and general provisions listed above.

Applicant's signature / title (on line above)

Date

Permit to be mailed to (check one): _____ Owner _____ Builder or _____ picked up at the Clerks office city of Walford, Ia.

Mayor approval _____

City Engineer approval _____