



Permit # _____

Right of Way / Sidewalk Permit Application

Submit Applications to: Permits@rumrivercc.com Scheduling: 763-331-7722

This Application becomes a *Numbered Permit* after the review is complete and payment of fees.

Work is **not** to begin prior to issuance. **All** information is required and **must** be completed.

Site Address _____ Property ID # _____

Property Owner Name _____

Address _____ City _____ State _____ Zip _____

Phone # _____ Email _____

Applicant Contractor Or Owner ~ Is this rental property? Yes No ~ Commercial Residential

Contractor Company Name _____

Address _____ City _____ State _____ Zip _____

Phone # _____ Email _____

Registered as an annual installer? Yes No ~ If "No", contact RCC to obtain this form

Applicant Name _____ Phone # _____

Emergency Name _____ Phone # _____ Email _____

Type of Permit

Emergency Excavation Obstruction / Aerial Interduct
Pole Attachment Small Cell Sidewalk

Purpose of Construction

New Repair Replacement Other

Project Description / Type of Construction / Special directions to job site: _____

Type of Construction

Aerial Bore (Specify) _____ Chamber Hole
Plow (Specify) _____ Other _____ Trench

Facilities Information

Cable TV Gas Traffic High Pressure Low Pressure
Storm Sewer Water Sanitary Sewer

Storm Sewer cable (size & type) _____

Conduit / Water Service (size & material) _____

Electric Voltage _____

Telecom Fiber Other _____

Construction Details

Excavation size: Length _____ Width _____ Depth _____ Total linear footage installed _____

ROW being used: Driving lane Parking lane Sidewalk Blvd Median

Type of Material

Bituminous Concrete Field Grass Gravel Sod Trees & Shrubs

Structures

Curb & Gutter Sidewalk Signals Other _____

Construction Schedule

Estimated start date _____ Estimated end date _____

Working daytime hours (Start - End) _____ Weekend/After hours dates _____

COMMENTS

(If this box is checked) Prior to any work being done in the ROW (Including Gopher State Locates,) the permit holder shall notify any affected property owners of the planned work to be done in the ROW.

Call Gopher One. Call for utility locations before you dig: 651-454-0002 ~ 1-800-252-1166

Be sure to include your sketch, sign, date & return all 3 pages

Office Use Only

Date **all** required information was received: _____

Approval:

Zoning _____ Date _____

Payment Info:

Payment received by _____

Cash _____ Ck # _____ Last 4 CC # _____ **Total Permit Fee \$** _____

Receipt #: _____ Date _____

Provide aerial sketch of property with proposed structures, show distance between property lines and structures



Site Address _____

The undersigned acknowledges the above information is correct and accepts responsibility for compliance with all applicable laws and ordinances of the ruling jurisdiction.

Applicant Signature _____ Date _____

Zoning Use Only: _____ Width in ROW _____ Width outside of ROW
_____ Surface Material _____ Setbacks _____ Impervious Surface

Other notes:

Zoning Approval _____ Date _____