

CITY OF CLAWSON
PERMIT APPLICATION FORM
RIGHT-OF-WAY / EASEMENT

A. PERMITEE:

(NAME) Please indicate if: Contractor, Developer, Telecommunications, Utility Comp.

(ADDRESS)

(CITY)

(STATE)

ZIP CODE)

(OFFICE PHONE)

(24-HOUR EMERGENCY PHONE)

B. DESCRIPTION OF CONSTRUCTION OPERATION(S):
(INCLUDE SIZE, LENGTH, TYPE OF FACILITY AND RESORATION)

C. LOCATION OF CONSTRUCTION OPERATION(S):

D. START DATE: _____

E. COMPLETION DATE: _____

F. PERMIT FEE (\$100.00): _____ or **METRO ACT** (PERMIT FEE WAIVED)

G. CASH CONSTRUCTION BOND: _____

H. INSPECTION ESCROW DEPOSIT: _____

I. CHECK LIST:

ENGINEERING PLAN REVIEW PHASE

- THREE SETS OF ENGINEERING PLANS
- ENGINEER'S CONSTRUCTION COST ESTIMATE
- ENGINEER'S REVIEW FEE
- EXECUTED EASEMENTS
- PERMITS

RIGHT OF WAY PERMIT PHASE

- APPROVED ENGINEERING PLANS
- PERMIT APPLICATION
- PERMIT FEE (\$100.00)
- CASH CONSTRUCTION BOND
- PROOF OF INSURANCE
- INSPECTION ESCROW DEPOSIT

Permittee

Date