



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

**A. PERMITEE:**

PLEASE INDICATE IF:  Contractor  Developer  Telecommunications  Utility Company

NAME

ADDRESS

CITY

STATE

ZIP CODE

OFFICE PHONE

24-HOUR EMERGENCY PHONE

**B. DESCRIPTION OF CONSTRUCTION OPERATION(S):**

(INCLUDE SIZE, LENGTH, TYPE OF FACILITY AND RESTORATION)

**C. LOCATION OF CONSTRUCTION OPERATION(S):**

**D. START DATE:** \_\_\_\_\_ **E. COMPLETION DATE:** \_\_\_\_\_

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

**G. CASE 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)
- CASE CONSTRUCTION BOND
- PROOF OF INSURANCE
- INSPECTION ESCROW DEPOSIT

PERMITEE

DATE