



**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. CASH CONSTRUCTION BOND: _____

H. 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
- ESCROW DEPOSIT

PERMITEE _____

DATE _____