



City of Fort Morgan

710 East Railroad Avenue, Fort Morgan CO 80701

Phone: (970) 542-3907 Fax: (970) 867-3039

PERMIT REQUIRES 48-HOUR NOTICE FOR PROCESSING

PERMIT NO.

Permit valid for 6 months
from date of issue

RIGHT-OF-WAY PERMIT APPLICATION

Applicant/Permittee

Name _____
 Company _____
 Address _____
 City _____ State _____ Zip _____
 Phone _____ Fax _____

Contractor/Developer

Name _____
 Company _____
 Address _____
 City _____ State _____ Zip _____
 Phone _____ Fax _____

Location/Description of Construction

Planned start date _____ Planned end date _____

Address/Location _____ Additional Sites Total

Construction	Type of Work	Existing Infrastructure Impacted
<input type="checkbox"/> New <input type="checkbox"/> Repair <input type="checkbox"/> Main <input type="checkbox"/> Service <input type="checkbox"/> Gas <input type="checkbox"/> Electric <input type="checkbox"/> Telephone <input type="checkbox"/> Cable <input type="checkbox"/> Storm Water <input type="checkbox"/> Irrigation <input type="checkbox"/> Potable Water <input type="checkbox"/> Sanitary Sewer <input type="checkbox"/> Other _____	<input type="checkbox"/> Bore (_____) Feet <input type="checkbox"/> Pothole <input type="checkbox"/> Treated/Untreated/Pavement Open Cut Width: <input type="checkbox"/> Up to 12" <input type="checkbox"/> 12" thru 36" <input type="checkbox"/> 37" and larger Length _____ ft Depth _____ ft <input type="checkbox"/> Other _____	<input type="checkbox"/> Utilities <input type="checkbox"/> Curb/Gutter <input type="checkbox"/> Treated Gravel <input type="checkbox"/> Pavement <input type="checkbox"/> Sidewalk <input type="checkbox"/> Untreated Road Surface Improvements <input type="checkbox"/> Utilities <input type="checkbox"/> Curb/Gutter <input type="checkbox"/> Treated Gravel <input type="checkbox"/> Pavement <input type="checkbox"/> Sidewalk <input type="checkbox"/> Untreated Road Square footage of surface improvements _____ Attach applicable copies of the following: <input checked="" type="checkbox"/> Construction Drawing/Site Plan <input checked="" type="checkbox"/> Certificate of Insurance <input type="checkbox"/> Traffic Control Plan <input type="checkbox"/> Performance Bond/LOC or <input type="checkbox"/> Property Protection Plan <input type="checkbox"/> Waiver from Treasurer <input type="checkbox"/> Erosion Control Plan <input type="checkbox"/> Letter of Responsibility <input type="checkbox"/> Other _____ <i>(Public utilities only)</i>

Description of work _____ *(Use additional sheets if necessary)* **Total Construction Costs:** \$ _____

By signing this permit, the applicant agrees to the terms and conditions of the Fort Morgan Municipal Code, Chapter 11, Streets, Sidewalks and Public Places, Article 3, Public Rights-of-Ways and as described herein. The applicant verifies that applicant and/or its contractors are not delinquent in payments due to City on prior work, that applicant and/or its contractors holds all permits or licenses (including required insurance, deposits, bonding, and warranties) required to do the proposed work, if such licenses or permits are required under the laws of the United States, the State of Colorado, or the Ordinances of the City, and that all orders issued by the City to the applicant and/or its contractor requiring correction of deficiencies under previous permits have been satisfied.

Applicants signature: _____ Date: _____

OFFICE USE ONLY

Additional conditions/comments: _____

Admin./Flat Fee: _____	<input type="checkbox"/> Cash <input type="checkbox"/> Check	Assigned Inspector: _____
LF/SF Fee: _____		Inspection Date: _____
Inspection Fee: _____		Horizontal/Vertical As-builts Rec'd: _____
TOTAL FEE: _____		3 Year Warranty Inspection Date: _____

Issued By (City Staff): _____ Date: _____