

# TOWN OF RED CEDAR UTILITY PERMIT APPLICATION

Applicant/Company: \_\_\_\_\_

Address: \_\_\_\_\_

Office Phone: \_\_\_\_\_

Local/Cell Phone: \_\_\_\_\_

Plans Prepared By: \_\_\_\_\_

Preparer's Phone: \_\_\_\_\_

## LOCATION INFORMATION

Town Road and Legal Description: \_\_\_\_\_

## ADDITIONAL INFORMATION

Utility Work Order No.: \_\_\_\_\_

Fee Required: \_\_\_\_\_ No \_\_\_\_\_ Yes

Fee Amount: \$ \_\_\_\_\_

## DESCRIPTION OF PROPOSED WORK (Check and circle all that apply)

UTILITY TYPE	Electric	Gas/petroleum	Communications	Water
	Sanitary sewer	Private line	Service facility size/capacity	Distribution
	Transmission			
ORIENTATION	Overhead	Underground	Parallel to road centerline	Tunnel
	Bridge attachment	Road crossing		
WORK TYPE	Maintenance	New construction	Improve/repair existing	Abandon in place
	Removal			
CONSTRUCTION	Plow	Trench	Bore	
METHODS	Open cut road	Suspend on pole/towers	Chemical treatment	Tree cutting/removal
	Cased			
EROSION CONTROL DESIGNATION	Major	Minor	Trees/brush	

Provide additional narrative, if needed: \_\_\_\_\_

NAME AND PHONE NUMBER OF UTILITY REPRESENTATIVE RESPONSIBLE FOR CONSTRUCTION: \_\_\_\_\_

Estimated start date: \_\_\_\_\_ Estimated completion/restoration date: \_\_\_\_\_

The applicant understands and agrees that the permitted work shall comply with all permit provisions and conditions of the Utility Ordinance of the Town of Red Cedar in effect at the time of this application and with any special provisions listed below or attached hereto, and any plan, details, or notes attached hereto and made a part thereof.

By: \_\_\_\_\_  
(Signature of Applicant/Co. Authorized Representative) (Title) (Date)

(Print name of person signing above) (Authorized applicant company representative phone number)

## DO NOT WRITE BELOW THIS LINE

## PERMIT APPROVAL BY PERMITTING AUTHORITY

The foregoing application is hereby approved and permit issued by the Permitting Authority subject to full compliance by the Applicant with all provisions and conditions stated in the Utility Ordinance of the Town of Red Cedar.

Supplemental Provisions Attached: Yes No

General Permit Fee: \$ \_\_\_\_\_

Annual Service Fee: \$ \_\_\_\_\_

Open Cut Permit Fee: \$ \_\_\_\_\_

By: \_\_\_\_\_  
(Authorized designee of the Town of Red Cedar)

(Title)

(Date)

Fee Received: \$ \_\_\_\_\_

Check No.: \_\_\_\_\_

Date Issued: \_\_\_\_\_

Road Project No.: \_\_\_\_\_

Permit No.: \_\_\_\_\_

Comments/Special Provisions: \_\_\_\_\_