

Public Right-of-Way Work Permit

Permit #: _____ Fee: \$50 □Paid

The City of Urbana | Engineering Department 205 South Main Street, Urbana, Ohio 43078 | (937) 652-4325 | www.urbanaohio.com

INCOMPLETE APPLICATIONS WILL NOT BE ACCEPTED. Submittal of an application does not constitute acceptance for processing until the Engineering Division reviews the application for accuracy and completeness.

General Information					
Property Address:					
Owner of Property:			Phone:		
Email:			Fax:		
Project Contact (Arch	nitect, Engineer, Planner, Co	ntractor, etc.)			
Name of Contractor:					
Address:			Phone:		
Email:			Fax:		
Applicant(s) (if differen	ent than owner)				
Name:					
Address:			Phone:		
Email:			Fax:		
Proposed Work					
☐ Sidewalk☐ Excavation☐ Other:	☐ Roadway ☐ Curb and gutter	☐ Replaceme		☐ Drive appro	oach
Description of proposed v	vork:				
Applicant's Affidavit					
The undersigned hereby applies the right-of-way herein located a Urbana Chapter 1167 Constructive requirements of that Code. He/s knowledge. The undersigned un and subsequent approval thereo below, the applicant hereby agre	for a permit to alter or construct a side of and described. The undersigned states to standards and Drawings and guarant she certifies that the information contain derstands that knowingly falsifying this of. He/she also understands that if a percess that the contractor shall guarantee to pair the faulty work and bill the contractyment.	that he/she is well informates that all work and med herein including at information may be grown it is issued, it shall re he work for a two-year	rmed on the Plann naterial will meet tachments is corre ounds for the den main in force for s warranty period.	ning and Zoning Cod or exceed the minin ect to the best of his ial or revoking of this six calendar months If the work fails du	e of the City of num s/her is application . By signing ring the
Signature of Applicant:			Date:		
Office Use Only					
Date Filed:		Th	is application is	☐ Approved	☐ Denied
Application Fee Paid on		☐ Cash ☐ De	ebit/Credit Card	☐ Check #	
Approved by:			Date:		