

PERMIT APPLICATION
PAVEMENT CUTS AND UTILITY WORK IN PUBLIC RIGHTS OF WAY
CITY OF HOT SPRINGS

Owner:

Contractor:

phone:

email:

Requestor:

phone:

email:

Foreman:

phone:

email:

Project Address:

Street Name:

from

to

Other:

Start Date:

End Date:

Traffic Plan:

Project Description: Please provide a brief project overview. Attach extra page if more space is needed.

Utility Size and Type of Materials:

Size of Utility: 2" or smaller Other- State Size(s):

Type of Utility: Trench width if using open cut:

Sleeve/Encasement/Conduit- size and type:

Please select all that apply:

Cut Bore **Surface Type Affected:** Pavement Unpaved Shoulder Sidewalk/Curb/Gutter

Full Lane Width Repair if pavement is 5 years old or less

Half Lane Width Repair if pavement is more than 5 years old Outside half of lane Inside half of lane

Width of asphalt replaced: Length of asphalt replaced:

For bond amount provide an estimated cost of restoration for backfill/concrete/asphalt/other:

backfill	sq yd @	per =
concrete	sq ft @	per =
asphalt	sq ft @	per =
other	@	per =

Amount required for 2 year Assurance Bond

I have received and read the City of Hot Springs Ordinance No. 6250. I understand and will abide by all requirements to perform work within CHS rights of way.

Applicant Signature

Date

Attachments to Application (select all that apply):

- Assurance Assurance on file
- Certificate of Insurance Certificate of Insurance on file
- Traffic Plan
- Photos/Video of pre-work conditions
- Project Sketch/Area Map

*** For Office Use Only ***

Additional information requested by:

Date:

Approved by:

Date:

Permit Number: