\$25	Fee		
ソムン			



## **Application to Occupy Right of Way**

Appli	cant: (Name and Address)	_ Date	:				
ı		l Pho	ne:				
		Ema	il·				
L							
Туре	With a			Size	Material Typ		
Overcross	☐ Water Line (or service)						
Undercross	Sewer Line (or service)						
Occupy	Gas Line						
Miscellaneous	Telephone Line Underground Aerial						
Barricades Qty =	Communications/Fiber Optic Line						
Food Truck	☐ Electric Line ☐ Undergrou						
or Event Mark barricades too for	If aerial, type of Section: Ditch			bstruction			
traffic/parking control	☐ Tree Trimming/Tree Removal	☐ Grading	J Other				
<b>Location:</b> The wor	k/event will take place along		beginning a	ıt	and		
			ng lot area)				
	The work/ev	vent will take p			_ side of the street		
or (street/ave	nue/parking lot area) r the street. The proposed work/eve	ant is schadule	(nort	h/south/east/west)			
	Title street. The proposed work eve	ent is scriedule	u to begin on		·		
. The estimated d	ate of completion is						
cancel the permit with	written notification at any time prior to be	eginning work or	City right of way.				
Performance Gu	larantee: (Construction pr	ojects only	Make checks <sub>I</sub>	payable to City	of York, NE)		
Amount: \$	0. 1/4	•	-	-	,		
Name and Addre		<u> </u>	•••••				
	e faithful compliance by the Applicant to	the terms of the	permit. It is understood	that should the Applic	cant fail to perform the		
work as set forth in the	permit, the City will have the right to keep	the performand	e guarantee as liquidate	d damages for its nece	essary supervisory and		
	nd to initiate such legal proceedings as an ation of the right of way to its previous cor				ance with the terms o		
		-					
	nance Guarantee is a bond in the a						
	es engineering plans, please sub ing plans shall show the general fe						
	mensions, cuts and fills, erosion c						
XCLUSION OF LIABIL	<u>ITY</u>						
	ately owned service lines and utilitie						
he applicant and the	applicant's contractors. The City of	York, Nebrask	a assumes no respons	sibility for damage to	o private utilities.		
Applicant Name (Please	Print)		Applicant's S	Signature			
	•	ate	City App	roval	Date		
ity Recommenda	tions:						
Date and time the	applicant will pick up barricade	es.			05/202		