



Permit for Work on City Right-Of-Way, City Easement & City Property

Public Works Department

Fax _____ Mail _____ Walk-In _____

SECTION 1

Date of Application _____

BOND ON FILE YES NO

CERT. OF INS. ON FILE YES NO

R.O.W. PERMIT # _____

BLDG. PERMIT # _____

DIG SAFE TICKET # _____

TRAFFIC SERVICES TICKET# _____

UTILITY LOCATES:

DIG SAFE 1-800-344-7233 or 811

OVERLAND PARK TRAFFIC SERVICES (913) 327-6600

WATER DISTRICT #1 (913) 895-1806

- PERMIT TYPE WATER GAS WASTEWATER WATER/SEWER SERVICE
 CATV ELECTRIC COMMUNICATIONS
 DRIVEWAY OTHER _____

SECTION 2

CONTACT INFORMATION (please print)

APPLICANT

APPLICANT _____ TELEPHONE # _____

CONTACT NAME _____ CELL # _____

ADDRESS _____ FAX # _____

CITY, STATE, ZIP _____

CONTRACTOR (if different than applicant)

CONTRACTOR _____ TELEPHONE # _____

CONTACT NAME _____ CELL # _____

ADDRESS _____ FAX # _____

CITY, STATE, ZIP _____

OWNER OF FACILITIES (utility company)

OWNER _____ TELEPHONE # _____

CONTACT NAME _____ CELL # _____

ADDRESS _____ FAX # _____

CITY, STATE, ZIP _____

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SECTION 3

PERMIT LOCATION AND/OR STREET ADDRESS _____

If linear installation, from _____ to _____ on _____

PURPOSE REPAIR REPLACEMENT NEW INSTALLATION OTHER

INSTALLATION METHOD OPEN CUT TUNNELING/BORING OTHER

AFFECTED AREA PAVEMENT GRASS CURB SIDEWALK DRIVEWAY
 POTHOLES/SPOT HOLES IN PAVEMENT SERVICE CONNECTION ACROSS STREET

IF A STREET CUT, LENGTH AND WIDTH OF THE CUT _____

START DATE _____ COMPLETION DATE _____

TOTAL DISTURBED AREA* _____ SQ. FT. ACRES

*Total Disturbed Area includes all land area (paved and unpaved) affected by excavation and grading associated with this project. If ≥ 1 acre, separate Land Disturbance permit required.

Is project for service to a new development? Yes Development Name _____
 No

SECTION 4 COMMUNICATIONS/CATV/ELECTRICAL SERVICE

PURPOSE REPAIR INSTALL CONDUIT - SIZE & NUMBER _____
 INSTALL FIBER CABLE - COUNT _____ INSTALL COPPER/COAX CABLE - COUNT _____
 INSTALL/REPLACE POLES INSTALL POWER CABLE OTHER _____

METHOD OPEN CUT TUNNELING/BORING DIRECT BURIAL AERIAL/POLE ATTACHMENT
 INSTALLATION IN EXISTING CONDUIT INSTALL HANDHOLE/MANHOLE - SIZE _____
 INSTALL ABOVE GRADE UTILITY STRUCTURES, SIZE & NUMBER _____
 INSTALL ELECTRICAL SERVICE WITH METER OTHER _____

SECTION 5

ATTACH DRAWING OR ENGINEERING PLANS OF THE PERMIT LOCATION, INCLUDING PROPOSED WORK AND EXISTING UTILITIES WITHIN WORK AREA.

CERTIFICATION: I certify I have been given a copy of the Overland Park, Kansas Municipal Code 13.12 and that I have read and understand the provisions of that Chapter as it pertains to fees, backfill and restoration, liability to the City of Overland Park and method of release upon completion of my work.

PERMIT ISSUE DATE _____

**Permittee or Authorized Agent
Signature Above Required for Processing**

PERMIT FEE _____

*EXCAVATION FEE _____

City Engineer or Authorized Agent

TOTAL _____

*If street cut is necessary after permit has been issued, permittee will be charged a excavation fee which must be paid before subsequent permits will be issued.