PERMIT TO CUT INTO A CITY STREET OR ALLEY
PERMIT GOOD FOR 90 DAYS FROM ISSUE DATE

To the BOARD OF PUBLIC WORKS AND SAFETY
City of Brazil
Department of Planning and Zoning
Brazil Indiana 20

I hereby make application for a permit to cut into Street – Alley at the following described location Purpose of opening:

Type of surface to be cut: Asphalt Concrete Stone
Size of trench opening to be made will be feet long by feet wide. (Draw a sketch below) showing exact location, dimension, depth of opening, etc. or submit a blue print a separate sheet securely fastened hereto.

CHARGE: Twenty five Dollars ($25.00) inspection fee must be paid to City Planning and Zoning Office upon approval by City Planning Administrator. The City Planning Administrator reserves the right to restrict work on the major arterial streets during peak hour traffic movements, except in extreme emergency situations.

RESPONSIBILITY: To fill trench and make surface repairs as noted on back of permit form. I further agree to erect and maintain all necessary barricades, detour signs and warning lights (in accordance with the Indiana Manual of Uniform Traffic Control Devices). Required to safely direct traffic over or around that part of the road where the above described work is to be done so long as the work is in any way interferes with traffic.

I further agree to move or remove any structures installed under this permit, should future traffic conditions or improvements necessitate and when requested to do so by the BOARD OF PUBLIC WORKS AND SAFETY.

I further agree to notify the City Planning and Zoning Office either by telephone the day preceding the beginning of the work; also to notify the City Planning and Zoning Office when the work is completed. Also the City Police.

I further agree to maintain (repair as necessary) the road surface, which has been disturbed, in a smooth, uniform condition for a period of two (2) years after traffic is again permitted to pass over the repaired trench.

Note: The Applicant is hereby notified of the penalty provisions of Ordinance No. which provides for double the permit fee per day non-compliance.

APPROVED:

__________________________
Signature of Applicant or Name of Company

BY

__________________________
City Planning Administrator or Designated Representative

Address ____________________________
Phone # ____________________________

Date Completed: ____________________________

Sketch: