

RIGHT-OF-WAY PERMIT

Permit number _____

Application made by _____

Address _____

Telephone _____

Fax _____

Contact person _____

For a permit to _____

Location _____

To be completed on or before _____

Application fee \$ _____

OFFICE USE ONLY

Witness my hand this _____ day of _____, _____

City Engineer's Office _____

PROPERTY OWNER - I certify that I am the legal owner of the above referenced property and that all work will be done under my supervision as the contractor.

Signature _____ Date _____

CONTRACTOR - I certify that I have a current Contractor's Bond on file in the City of Enid Code Office and will be responsible for the work covered by this permit.

Signature _____ Date _____

Right-Of-Way Permit

Perform all work in accordance with City of Enid standard specifications, where applicable. Call 234-0400 two hours prior to pouring concrete for inspection. All work zones and devices shall be in accordance with the latest release of the Manual on Uniform Traffic Control Devices. This permit must be kept at the job site until work is completed. Call OKIE two working days before you dig at 1-800-522-6543.

OFFICE USE ONLY

- | | | |
|--------------------------|-------------------|------------|
| 1. Street Department | Approved by _____ | Date _____ |
| 2. Traffic Control | Approved by _____ | Date _____ |
| 3. Utility Maintenance | Approved by _____ | Date _____ |
| 4. Stormwater Management | Approved by _____ | Date _____ |
| 5. Others | Approved by _____ | Date _____ |