



**ALLEY, STREET OR
EASEMENT CUT
PERMIT APPLICATION**

PROJECT SITE: _____

OWNER: _____

MAILING ADDRESS: _____

PHONE: _____ EMAIL: _____

PROJECT TYPE: ☐ WATER SERVICE ☐ SEWER SERVICE ☐ GAS SERVICE ☐ PHONE
☐ ELECTRIC ☐ CABLE ☐ OTHER _____
☐ NEW SERVICE ☐ PRIOR SERVICE ☐ SPLIT SERVICE
☐ PAVED ALLEY ☐ CRUSHED ASPHALT ☐ PAVED STREET

ESTIMATED SIZE OF CUT: WIDTH _____ X LENGTH _____ LOCATION _____

WILL CUT INVOLVE DRIVEWAY OR YARD?: ☐ YES ☐ NO EXPLAIN: _____

IF YES, EXPLAIN: _____

PERMIT: # _____

INSPECTOR: _____ DATE APPROVED: _____

REPAIR: ☐ PROPERTY OWNER ☐ CONTACTOR ☐ CITY OF CANYON

I AGREE TO PAY THE CITY OF CANYON FOR THE REPAIR COSTS OF THE CUT AT THE RATE OF \$20.00 PER SQUARE FOOT. I UNDERSTAND THAT I WILL BE BILLED FOR THE ADDITIONAL COSTS IF THE CUT EXCEEDS THE DIMENSIONS NOTED ABOVE. I UNDERSTAND THAT ALL EXCAVATIONS MUST BE BACKFILLED ACCORDING TO CITY ORDINANCES AND SPECIFICATIONS. THE CONTRACTOR SHALL BE HELD FINANCIALLY RESPONSIBLE FOR ANY REQUIRED REPAIRS.

SIGNATURE DATE

CONTRACTOR COMPANY/NAME: _____

MAILING ADDRESS: _____ PHONE: _____

IS DEPOSIT OR INSURANCE POSTED: ☐ YES ☐ NO EXPLAIN: _____

SERVICE ORDER:

DATE BEGAN: _____ DATE COMPLETED: _____

AMOUNT TO BE BILLED: _____ DATE BILLED: _____

DATE PAID: _____ PAYMENT: _____