

CITY OF FITZGERALD
RIGHT-OF-WAY ENCROACHMENT PERMIT
APPLICATION FORM

Permitee/Applicant Information	Contractor Information
Applicant Name: _____	Contractor Name: _____
Business Name: _____	
Address: _____	Address: _____

City: _____	City: _____
State: _____ Zip Code: _____	State: _____ Zip Code: _____
Phone: (_____) _____	Phone: (_____) _____
Fax: (_____) _____	Fax: (_____) _____
Contact Person Name: _____	Contact Person Name: _____
Contact Person Phone: (_____) _____	Contact Person Phone: (_____) _____
Email Address: _____	Email Address: _____

24-Hour Contact Information

Contact Name: _____ Title: _____
Cell Phone: (____) _____ Email Address: _____

Site/Work Right-of-way Location

Type of Permit (check all that apply)

☐ Shoulder Construction	☐ Utility Installation	☐ Street Cut	☐ Street Bore
☐ Lane/Road Closure	☐ Private Drive Cut	☐ Private Drive Bore	☐ Drive Construction
☐ Other (please specify) _____			

Describe Scope of Work (size, type, length, etc.) _____

TOTAL LENGTH OF AREA IN SCOPE OF WORK: _____ LINEAR FEET

Project Start / Completion Dates and Estimated Project Cost

Project Start Date:_____ **End Date:**_____ **Estimated Project Cost: \$**_____

Special Provisions

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Applicant Certification

Applicant agrees to indemnify and hold harmless the City of Fitzgerald and all officers, employees or agents of the City of Fitzgerald against any and all claims, damages, demands, actions, causes of action, costs and expenses of whatsoever nature, which may result from any injury to, or the death of any persons, or from the loss of or damage to, property of any kind or nature, when such injury, death, loss or damage arises out of the construction operation, maintenance, repair, removal or relocation of the facilities covered by the permit.

This permit is requested this _____ day of _____ in the year 2024 .

By Signature

Witness Signature

Printed Name

Title / Position

**** TO BE COMPLETED BY THE CITY STAFF ****

Permission is granted for the above described encroachment in accordance with the plans/drawings attached hereto and made a part thereof. This permit is to be strictly construed and no work other than that specifically described above is hereby authorized.

Application Reviewed By: _____ Date: _____
City Staff Permit granted this ____ day
of _____ 20____.

Permit is hereby: ☐ **APPROVED** ☐ **DENIED** ☐ Comment ☐ Reason for Denial: _____

Permit granted by: _____

INSPECTION BY: _____ DATE: _____

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☐ **INSPECTION PASSED** ☐ **INSPECTION FAILED** (specify): _____

RE-INSPECTION BY: _____ DATE: _____ ☐ PASS ☐ FAIL

**INSERT
RIGHT-OF-WAY
MAP
HERE**