

A copy of the approved permit must be on the job site at all times



RIGHT-OF-WAY USE PERMIT APPLICATION

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Rev.08/2020

Permit Valid for 120 Days From Date of Approval

**All activity authorized by this permit shall be in accordance with
CHAPTER 283 of the Texas Local Government Code and the City of
Coppell Public Rights-of-Way Management ordinance No. 2001-944**

Date of Submittal: _____ Applicant's Job # / Work Order # _____

Project Name / Location and Address: _____

Permit Fee: \$100.00 (No fee for applications submitted on behalf of Utility Companies with a current Public Rights-of-Way Management Ordinance Registration). S.P.C.O.A. Certificate # _____

Utility Company Information:

☐ Oncor Electric Delivery ☐ Atmos Energy ☐ Frontier ☐ Spectrum

☐ Level 3 ☐ Other: _____

Utility Company Representative: _____

E-mail Address: _____ Telephone: _____

Contractor Information:

General Contractor: _____

General Contractor Representative: _____

E-mail Address: _____ Telephone: _____

Project Information:

General Description of Proposed Construction (Attach Plan & Profile, See Page 5 for Example):

Estimated Start Date: _____ Estimated Completion Date: _____

Has 811 and/or utility companies been contacted 48 hours prior to locate existing utilities?
Yes ☐ No ☐ If No, state reason: _____

Is removal of existing streets, alleys or sidewalks necessary? Yes ☐ No ☐

If YES, repair must have a City inspection prior to completion. Call 972-304-3679.

Is closure of any traffic lanes or driveway approaches necessary? Yes ☐ No ☐

If YES, a traffic control plan in accordance with TMUTCD standards must be submitted, and the following departments must be notified of the location and duration of the closure:

Police Department, 972-304-3600

Fire Department, 972-304-3512

Street Department, 972-462-5150

Engineering Department, 972-304-3679

Traffic lane closures are allowed from 9:30 a.m. until 3:30 p.m. ONLY unless otherwise approved by the City Engineer.

--Work activity is permitted from 7:00 a.m. until 7:00 p.m., Monday through Friday only.--

This application, with signatures of Utility and Contractor representatives, must be submitted to the Engineering Department for approval prior to commencing work. Printing your name and date on this form indicates your acceptance of the terms and conditions of this application.

Applicant shall indemnify and forever hold harmless against the City of Coppell each and every claim, demand, or cause of action that may be made or come against it by reason of or if any way arising out of the closure, blocking, excavating, cutting, tunneling, or other work by the applicant under permit from the City, if such permit is granted.

Signature of Utility Company Representative

Date

Signature of Contractor Representative

Date

☐ APPROVED City Representative
☐ DENIED

Date

Comments:

E-mail address to return completed permit: _____

Submit permit application by e-mail to engineer@coppelltx.gov, or deliver application to the Engineering Department, Town Center Business Park, 265 E Parkway Blvd, Coppell, TX 75019

SUMMARY OF REQUIREMENTS FOR WORK WITHIN THE CITY OF COPPELL RIGHTS-OF-WAY OR EASEMENTS

1. A copy of the valid approved City of Coppell permit is required on the project site at all times.
2. Property owners (commercial and residential) adjacent to the project must be notified of the project timeline and provided contractor names and phone numbers. No access to private property without prior coordination with property owner.
3. Proper erosion control measures must be taken, in accordance with the Coppell Erosion Control Ordinance No. 91-514.
4. Follow Texas MUTCD standards for work in traffic zones. Lane closures require the use of a flashing arrow board for advance warning.
5. Grading shall be restored or improved, and sod replaced when necessary.

6. Irrigation repairs must be performed in a timely manner.
7. Follow OSHA trench safety guidelines at all times.
8. Repair existing utilities that are damaged, including but not limited to: Clean-outs, water valves, wastewater manholes, water lines, wastewater lines and storm sewer lines.
9. Density tests may be required, at applicant's expense, in trench lines (ASTM).
10. Protection and repair of traffic control devices and signage is the responsibility of the contractor.
11. No work is to be done in collector roadways before 9:30 a.m. or after 3:30 p.m.
12. Prior request of work activity on weekends and holidays must be submitted in writing.
13. Utility line locates must be performed in advance of construction by calling 811 or logging on to the Texas811 Portal at: <http://www.texas811.org>. Additional utility contacts are as follows:

COPPELL PUBLIC WORKS - OPERATIONS
972-462-5150

HOMEOWNER ASSOCIATIONS
Planning Department: [H.O.A. List](#)

F.E.M.A.
940-898-5399

DALLAS WATER UTILITIES
214-670-5111

AT&T
800-924-9420

COSERV Gas & Electric
940-321-7800

FRONTIER COMMUNICATIONS
800-584-3384

SPECTRUM CABLE
833-780-1880

COPPELL PUBLIC WORKS - ENGINEERING
972-304-3679

DENTON COUNTY LEVEE DISTRICT
972-315-5019

T.C.E.Q. Region 4
817-588-5800

IRVING WATER UTILITIES
972-721-2281

ATMOS ENERGY
888-286-6700

EXPLORER PIPELINE
918-493-5100

ONCOR ELECTRIC DELIVERY
888-313-6862

14. Debris must be removed from work area daily and disposed of properly outside the City.
15. Streets, sidewalks and alleys must be kept clear of construction materials and debris.
16. "Clean-up" requires returning work area to pre-construction condition or better.



COMPLETION VERIFICATION NOTICE

Contact Coppell Public Works Operations at 972/462-5150 to schedule an inspection with Utility and Streets personnel to verify that your project has been completed to City of Coppell specifications. *Failure to schedule verification inspection may delay future projects.*

Franchise Utility Name: _____

Project Location or Address: _____

Sub-contractor Company Name: _____

24 hr. Contact Number: _____

Date of Verification Appointment: _____ Time: _____

-INFORMATION BELOW TO BE COMPLETED BY CITY OF COPPELL PUBLIC WORKS PERSONNEL-

Inspected by: _____ of Utilities Maintenance Division on _____

and found to be ☐ acceptable, ☐ not acceptable because: _____

Follow-up needed? ☐ No ☐ Yes, follow-up scheduled for: _____

Inspected by: _____ of Streets Maintenance Division on _____

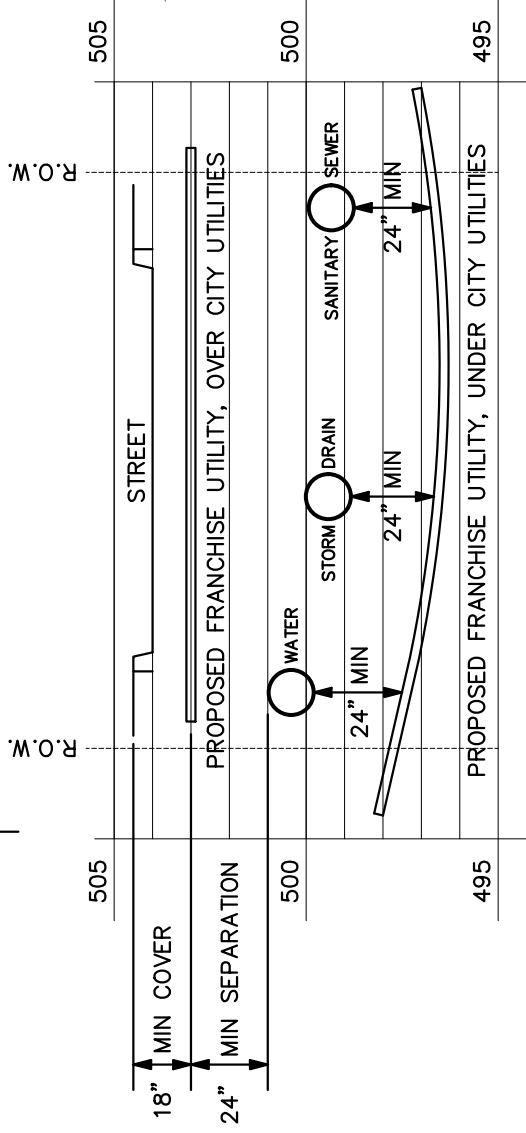
and found to be ☐ acceptable, ☐ not acceptable because: _____

Follow-up needed? ☐ No ☐ Yes, follow-up scheduled for: _____

A copy of this completed notice can be e-mailed to the [Coppell Public Works Operations Division](#), or delivered to the address below:

City of Coppell Public Works Department, Operations Division
816 S. Coppell Road
Coppell, TX 75019

1. SHOW YOUR LINE WITH A DIFFERENT LINE TYPE AND DIMENSION THE DISTANCE FROM EXISTING UTILITIES.
2. MINIMUM HORIZONTAL SEPARATION=60" (5 FT).
3. MINIMUM VERTICAL SEPARATION=24" (2 FT).
4. MINIMUM BURY DEPTH=18" (1.5 FT).



FRANCHISE NAME	
TYPE OF UTILITY	DATE
CITY OF COPPELL UTILITY PERMIT	

PROFILE AT UTILITY CROSSING
(SEE GENERAL NOTES)