

This new permit consolidates the previous Right-of-Way Encroachment and Excavation Permits

Applicant:		circle one (C	ontractor) (Property C	Owner)
Project Address or Street	Intersection:			
Phone:	hone: Email:			
TYPE OF WORK				
☐ Sewer	☐ Gas, Electric, Cor	mmunications	☐ Driveway I	nstallation/Repair
□ Water	☐ Temporary Encros	achment	□ Sidewalk I	nstallation/Repair
	our work will not require cutting or diggi	ing within the Tow	n right-of-way.	
Contact Information				
Property Owner	Mailing Address:		P	hone:
Contractor	Mailing Address:		Р	hone:
Engineer/Architect	Mailing Address:	Mailing Address:		hone:
Insurance Provider	Mailing Address:	Mailing Address:		hone:
Bond Co.	Mailing Address:	Mailing Address:		hone:
Project Information				
□ New Construction	□Alteration	<u> </u>		 Repair
		d Amount: x Project Value if less that 5 x Project Value if \$50,00		
Start Date:		Completion Date:		
Description of Work: Attach construction plans an	d specifications. Include street names and	landmarks. Include	traffic control mea	sures.



EXCAVATION INSPECTION LIST

Keep this document onsite and available for presentation upon Town request.

Leave this section blank if your work will not require cutting or digging within the Town right-of-way.

Pre-Construction Inspection:		
☐ Utilities Impacted:	Materials Testing Requi	red
☐ Backfill/Subgrade Inspection Required	☐ Concrete Placement Re	quired
☐ Road Base Inspection Required	☐ CCTV Video Required	
☐ Asphalt	☐ SUE Required	
Construction Inspection: Required Inspections	Inspector Signature/Date	
☐ Utility Inspection		
☐ Backfill/Subgrade		
☐ Road Base		
☐ Asphalt		
☐ Materials Testing		
☐ Concrete		
☐ CCTV Video		
	within 1 business day by calling Public Works at (9 n notification to the Contractor's bonding company	•
Permit Completion and Acceptance	Date: Town Representative	Date



Phone:

ENCROACHMENT

Use this section for temporary occupation of the town right-of-way not related to excavation.

Mailing Address:

Contact Information Property Owner/Manager:

Contractor:	Mailing Addre	ss:	Pnone:
Encroachment Description			
Item of Encroachment:		Location of Encroachment:	
Start Date:		End Date:	
Purpose and Description of Encroachme (Attach drawings or pictures hereto.)	nt:		

For encroachments, please include the following in your submission:

- Affidavit of Insurance Coverage, naming the town as additionally insured.
- A nonrefundable application fee in accordance with the attached fee schedules, in cash or check made out to the Town of Crested Butte. Do not combine fees.
- Traffic management plan. Include vehicular and pedestrian traffic protection devices and notifications of all emergency service authorities.
- "Scaled Plan" of the site. Plan shall indicate the requested area (in square feet) to be encroached upon, locations of parking if requested, abutting property lines, addresses, and street names.
- Any applicable encroachment license agreements granted by the Town.



Permit Conditions

The following conditions apply to the work authorized by this permit:						

This Permit shall become null and void if construction or encroachment is not commenced within 60 days of the date of issuance. The Permit shall expire on the 1st of October after the date of issuance and all construction must be completed prior to the expiration of the permit.

- 1. Safety: The permittee is expected to abide by OSHA safety regulations when operating in the Town Right-of-Way.
- 2. Scope of Work: The work shall be limited to the specific locations, dimensions, and activities detailed in the permit application and approved plans. Any deviations require prior written approval from the permitting authority.
- 3. KNOW WHAT'S BELOW: The permittee is expected to file utility locate requests prior to any excavation in the Right-of-Way. Note that Town of Crested Butte does NOT locate private service utilities.
- 4. Restoration: The permittee is responsible for restoring the excavation site, including all disturbed areas, to their original or better condition within [specified time frame]. This includes but is not limited to the replacement of pavement, landscaping, and utilities.
- 5. Traffic Control: A traffic control plan must be implemented and maintained in accordance with applicable regulations and standards to ensure public safety.
- 6. Inspection Requirements: The Town reserves the right to inspect the site at any time during the work period to ensure compliance with permit conditions.
- Liability and Insurance: The permittee must hold the Town harmless from any claims, damages, or liabilities arising from the work. Proof of adequate insurance must be submitted prior to commencing any work.
- 8. Work Hours: All work must be conducted during the hours laid out in Town Code. Emergency operations will be approved at the discretion of Town Public Works
- 9. Environmental Protection: Measures must be taken to prevent environmental harm, including proper disposal of excavated materials and protection of nearby natural resources.
- 10. Permit Display: A copy of this permit must be kept on-site and made available upon request.



I hereby certify that I have read and examined this application and set of instructions and that all information in this application is true and correct. All provisions of the Town of Crested Butte Excavation and Cutting Specifications and Requirements will be complied with whether specified herein or not. The granting of a permit does not presume to give authority to violate or cancel provisions of any other state or local law regulating construction or the performance of construction.

Further, I understand that the violation of any of the provisions of this permit may be subject to a fine of \$2,650.00 for each violation and for each day of a continuing violation.

X			
Signature of Contractor/Authorized Agent			
Χ			
Signature of Owner	_ _		
This permit for right-of-way	excavation and encroacl	nment is hereby approved,	
		nances, rules, and conditions	
listed herein. The applicant proper execution of the autl	_	outlined requirements and en	sure
Approved by:	Title:	Date:	



Right-of-Way Fee Schedule

Fee	Amount
Excavation	\$100.00
Encroachment	\$50.00 per 25 linear feet of ROW

Bond Requirements

Project Valuation	Amount
\$1 - \$50,000	20% of Project Valuation
>\$50,000	No Less than 100% Project Valuation