



Right-of-Way Permit Application

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

Applicant: _____ circle one (Contractor) (Property Owner)

Project Address or Street Intersection: _____

Phone: _____ Email: _____

TYPE OF WORK

<input type="checkbox"/> Sewer	<input type="checkbox"/> Gas, Electric, Communications	<input type="checkbox"/> Driveway Installation/Repair
<input type="checkbox"/> Water	<input type="checkbox"/> Temporary Encroachment	<input type="checkbox"/> Sidewalk Installation/Repair

EXCAVATION

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

Contact Information

Property Owner	Mailing Address:	Phone:
Contractor	Mailing Address:	Phone:
Engineer/Architect	Mailing Address:	Phone:
Insurance Provider	Mailing Address:	Phone:
Bond Co.	Mailing Address:	Phone:

Project Information

<input type="checkbox"/> New Construction	<input type="checkbox"/> Alteration	<input type="checkbox"/> Repair
Project Valuation:	Bond Amount: <i>20% x Project Value if less than \$50,000</i> <i>100% x Project Value if \$50,000 or greater</i>	
Start Date:	Completion Date:	
Description of Work: <i>Attach construction plans and specifications. Include street names and landmarks. Include traffic control measures.</i>		



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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:

- | | |
|--|--|
| <input type="checkbox"/> Utilities Impacted: _____ | <input type="checkbox"/> Materials Testing Required |
| <input type="checkbox"/> Backfill/Subgrade Inspection Required | <input type="checkbox"/> Concrete Placement Required |
| <input type="checkbox"/> Road Base Inspection Required | <input type="checkbox"/> CCTV Video Required |
| <input type="checkbox"/> Asphalt | <input type="checkbox"/> SUE Required |

Construction Inspection:

Required Inspections

Inspector Signature/Date

- | | |
|---|-------|
| <input type="checkbox"/> Utility Inspection | _____ |
| <input type="checkbox"/> Backfill/Subgrade | _____ |
| <input type="checkbox"/> Road Base | _____ |
| <input type="checkbox"/> Asphalt | _____ |
| <input type="checkbox"/> Materials Testing | _____ |
| <input type="checkbox"/> Concrete | _____ |
| <input type="checkbox"/> CCTV Video | _____ |

Final Inspection Sign-off:

The Applicant shall schedule an inspection within **1 business day** by calling Public Works at (970) 349-5338 x122. Failure to obtain final inspection sign-offs will result in notification to the Contractor's bonding company and may result in legal action or removal of placed material.

Permit Completion and Acceptance Date: _____

Town Representative

Date



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ENCROACHMENT

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

Contact Information

Property Owner/Manager:	Mailing Address:	Phone:
Contractor:	Mailing Address:	Phone:

Encroachment Description

Item of Encroachment:	Location of Encroachment:
Start Date:	End Date:
Purpose and Description of Encroachment: <i>(Attach drawings or pictures hereto.)</i>	

For encroachments, please include the following in your submission:

- Affidavit of Insurance Coverage
- 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.



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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.

Contractors are expected to abide by OSHA safety regulations when operating in the Town Right-of-Way. Contractors found to be in violation of safety regulations will be subject to fines and future work limitations.

Contractors are 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.

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.

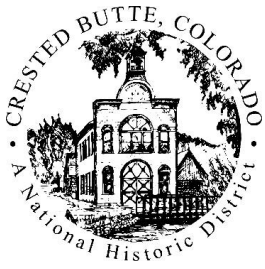
Further, I understand that the violation of any of the provisions of this permit may be subject to a fine of \$2,650.00 for each violation and for each day of a continuing violation.

X

Signature of Contractor/Authorized Agent

X

Signature of Owner



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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