

## PERMIT FOR WORK ON CITY RIGHT-OF-WAY, CITY EASEMENT & CITY PROPERTY

PUBLIC WORKS DEPARTMENT • 8500 Santa Fe Drive • Overland Park, KS 66212 • P - (913) 895-6040 • F - (913) 890-1055 DATE OF APPLICATION ☐ ePlace ☐ WALK-IN **UTILITY LOCATES** R.O.W. PERMIT # \_\_\_\_\_\_ DIG SAFE - 1-800-344-7233 OR 811 BLDG. PERMIT # \_\_\_\_ WATER DISTRICT #1 - 913-895-1806 DIG SAFE TICKET # STORM SEWER COLLECTION SYSTEMS WATER DISTRICT #1 TICKET # \_\_\_\_\_ The City operates and maintains the storm sewer collection system. Upon OTHER \_\_\_\_\_ request, the City will provide assistance in locating these facilities. TOTAL NUMBER OF ADDRESSES/PARCELS \_\_\_\_\_\_ **CONTACT INFORMATION** (please print) APPLICANT / CONTRACTOR ADDRESS \_\_\_\_\_ CITY \_\_\_\_\_ STATE \_\_\_\_ ZIP \_\_\_\_TEL# \_\_\_\_ CELL# \_\_\_\_\_ FAX# \_\_\_\_\_ EMAIL OWNER OF FACILITIES (utility company) CONTACT NAME \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

PLEASE ATTACH DRAWING OR ENGINEERING PLANS OF THE PERMIT LOCATION, INCLUDING PROPOSED WORK AND EXISTING UTILITIES WITHIN WORK AREA.

CITY \_\_\_\_\_ STATE \_\_\_\_ ZIP \_\_\_ TEL# \_\_\_\_\_

CELL#\_\_\_\_\_\_FAX#\_\_\_\_

☐ **CERTIFICATION:** I certify that I have been offered a copy of the Overland Park, Kansas Municipal Code 13.12 and that it is available on the city's website OPKANSAS.ORG.



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PERMIT TYPE	■ WATER	☐ GAS	<ul><li>☐ WASTEWATER</li><li>☐ COMMUNICATIONS</li></ul>		☐ WATER/SEWER SERVICE	
	☐ CATV	☐ ELECTRIC			☐ DRIVEWAY	
	$lacksquare$ other $\_$					
PERMIT VICINITY AND/OR STREET ADDRESS (please print)						
If linear installation, from			to	o on		
PURPOSE			INSTALLA	TION METH	HOD	
☐ NEW INSTALLATION			OPEN CUT			
☐ REPAIR			☐ AERIAL/POLE ATTACHMENT			
☐ REPLACEMENT			☐ DIRECT BURIAL			
☐ INSTALL COI	NUMBER	■ INSTALL ABOVE GRADE UTILITY STRUCTURES -				
☐ INSTALL COI	PPER/COAX CAB	LE – COUNT	SIZE & NUMBER			
☐ INSTALL FIB	NT	INSTALL ELECTRICAL SERVICE WITH METER				
☐ INSTALL POWER CABLE			☐ INSTALL HANDHOLE/MANHOLE - SIZE			
☐ INSTALL/REI	PLACE POLES		lue installation in existing conduit			
OTHER			TUNNELING/BORING			
			OTHER			
AFFECTED AR	EA					
☐ PAVEMENT	☐ PAVEMENT ☐ GRASS		☐ CURB	☐ SIDEW	ALK DRIVEWAY	
☐ POTHOLES/SPOT HOLES IN PAVEMENT			☐ SERVICE CONNECTION ACROSS STREET			
IF A STREET CU	T, LENGTH AND	WIDTH OF THE CU	JT			
Inspections are re advance notice is					wenty-four hour (24-hour)	
START DATE			COMPLETION DATE			
Is this permit for public improveme			development, c	onstruction	or reconstruction work of a	
If yes, what is the	name of the p	roject?				
SIGNATURE REQUIRED			PERMIT ISSUE DATE			
			PERMIT FE	Έ		
Permittee or Authorized Agent			EXCAVATION FEE*			
				TOTAL _		
City Engineer or Authorized Agent			*If a street cut is necessary after permit has been issued, permittee will be charged an excavation fee and must be paid before any subsequent permits will be issued.			