## **City of Lauderdale**

1891 Walnut Street • Lauderdale • Minnesota 55113 Phone: 651.792.7655 Fax: 651.631.2066

## RIGHT OF WAY PERMIT APPLICATION

Property Owner Name:				
Address:				
City:	State:	Zip:	Phone:	
Contractor Name:			1	
Address:				
City:	State:	Zip:	State License #:	91
Business Phone:	Cell Phone:	-		
Job Site Location:				
Describe proposed work in detail:				
				E .
Permit Fees:  Street Excavation Permit/Inspe  Obstruction Permit Fee: \$100.0  Performance and Restoration B  Engineer or Bond Review Fees  Proof of Registration and Reporting  I UNDERSTAND AND HEREB  PERFORMED ACCORDING TO  PLANS AND SPECIFICATIONS,  THE STATE BUILDING CODE.  REQUIRED INSPECTIONS ARE	ond: To be determined s:  ing: Applicant is to attach Y AGREE THAT THE THE FOLLOWING: (1 (3) THE APPLICABLE I ALSO UNDERSTAN REQUESTED IN CONFO	relevant documen  WORK FOR WI ) THE CONDITION CITY APPROV ND THAT I AM ORMANCE WITH	tation to this form  HICH THE PERMIT IS ONS OF THE PERMIT, ALS, ORDINANCES, AN RESPONSIBLE FOR EN I THE STATE BUILDING	(2) THE APPROVED ND CODES, AND (4) ISURING THAT ALL G CODE.
Applicant's Signature	Please Print Ap	plicant's Name	Date	-97
Date of Permit:  Type of Permit ( to be checked):  Fees (to be checked):  Receipt No	☐ Street Excavation ☐	Obstruction GO Total	Permit No.: _	□ Other
Inspection Types (to be checked):  Pinal Date:  Other Date:	ime: Comments Time: Comme	o: nts:		Initials: Initials:

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