

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: _____

Address: _____

City: _____ State: _____ Zip: _____ State License #: _____

Business Phone: _____ Cell Phone or Pager #: _____

Job Site Location: _____

Describe proposed work in detail: _____

Permit Fees:

- Street Excavation Permit/Inspection Fee: \$100.00
- Obstruction Permit Fee: \$100.00
- Performance and Restoration Bond : To be determined by the Lauderdale City Council
- Other Fees: _____

Proof of Registration and Reporting: Applicant is to attach relevant documentation to this form

I UNDERSTAND AND HEREBY AGREE THAT THE WORK FOR WHICH THE PERMIT IS ISSUED SHALL BE PERFORMED ACCORDING TO THE FOLLOWING: (1) THE CONDITIONS OF THE PERMIT, (2) THE APPROVED PLANS AND SPECIFICATIONS, (3) THE APPLICABLE CITY APPROVALS, ORDINANCES, AND CODES, AND (4) THE STATE BUILDING CODE. I ALSO UNDERSTAND THAT I AM RESPONSIBLE FOR ENSURING THAT ALL REQUIRED INSPECTIONS ARE REQUESTED IN CONFORMANCE WITH THE STATE BUILDING CODE.

Applicant's Signature

Please Print Applicant's Name

Date

FOR OFFICE USE ONLY:

Date of Permit: _____ Permit No.: _____

Type of Permit (to be checked): ☐ Street Excavation ☐ Obstruction ☐ Other _____

Fees (to be checked): ☐ Permit _____ ☐ Inspection _____ Total _____ ☐ Bond _____ ☐ Other _____

Receipt No. _____

Inspection Types (to be checked):

☐ Final Date: _____ Time: _____ Comments: _____ Initials: _____
☐ Other Date: _____ Time: _____ Comments: _____ Initials: _____