

**City of Bird Island**  
**660 Birch Avenue**  
**PO Box 130**  
**Bird Island, MN 55310 (Phone) 320-365-3371**

**PERMIT APPLICATION**  
**WORK IN RIGHT-OF-WAY**

|  |  |                   |  |                |  |                            |  |                                       |                        |  |  |             |        |
|--|--|-------------------|--|----------------|--|----------------------------|--|---------------------------------------|------------------------|--|--|-------------|--------|
| <input type="radio"/> Excavation Permit <input type="radio"/> Emergency Permit <input type="radio"/> Obstruction/Aerial Permit <input type="radio"/> Other |  |                   |  |                |  |                            |  |                                       |                        |  |  |             |        |
| Site Address:  |  |                   |  |                |  |                            |  |                                       | City Permit No:        |  |  |             |        |
| Location: (To and From)  |  |                   |  |                |  |                            |  |                                       | Date permit Requested: |  |  |             |        |
| Type of Construction:  |  |                   |  |                |  |                            |  |                                       |                        |  |  |             |        |
| Contractor performing Work in ROW:   |  |                   |  |                |  |                            |  |                                       | GSOC I.D. #            |  |  |             |        |
| Address:   |  |                   |  |                |  |                            |  |                                       | Registration #         |  |  |             |        |
| City / State / Zip   |  |                   |  |                |  |                            |  |                                       |                        |  |  |             |        |
| Contact Person:  |  |                   |  | Work Phone:    |  |                            |  | Pager #                               |                        |  |  |             |        |
|  |  |                   |  | Cell Phone:    |  |                            |  | 24 Hr.#                               |                        |  |  |             |        |
| Applicant if other than contractor:  |  |                   |  |                |  |                            |  |                                       | Registration #         |  |  |             |        |
| Contact Person:  |  |                   |  |                |  |                            |  |                                       |                        |  |  |             |        |
| <b>Facilities Information</b>  |  |                   |  |                |  |                            |  |                                       |                        |  |  |             |        |
|  |  | Cable TV          |  |                |  | Traffic                    |  | Water                                 |                        | Conduit / Water Service (Size & Materials) |  |             |        |
|  |  | Gas:              |  | High Pressure  |  | Low Pressure               |  | San Sewer                             |                        |  |  |             |        |
|  |  | Electric Voltage: |  |                |  |                            |  | Storm Sewer                           |                        | Cable (Size & Type)                        |  |             |        |
|  |  | Telecom.          |  | Fiber:         |  | Other                      |  |                                       |                        |  |  |             |        |
| <b>Purpose of Construction</b>   |  |                   |  |                |  |                            |  |                                       |                        |  |  |             |        |
|  |  | New               |  | Replacement    |  | Repair                     |  | Other (Describe):                     |                        |  |  |             |        |
| <b>Type of construction</b>  |  |                   |  |                |  |                            |  |                                       |                        |  |  |             |        |
|  |  | Trench            |  | Hole           |  | Chamber                    |  | Bore (Specify)                        |                        |  |  |             |        |
|  |  | Aerial            |  | Plow (Specify) |  |                            |  | Other (Describe)                      |                        |  |  |             |        |
| <b>Construction Details</b>  |  |                   |  |                |  |                            |  |                                       |                        |  |  |             |        |
| Excavation Size:   |  | <u>Length:</u>    |  | <u>Width:</u>  |  | <u>Depth:</u>              |  | <u>Total Linear Footage Installed</u> |                        |  |  |             |        |
| ROW being used   |  | Driving Lane      |  | Parking Lane   |  | Sidewalk                   |  | Blvd                                  |                        | Median                                     |  |             |        |
| Type of Material   |  | Concrete          |  | Bituminous     |  | Gravel                     |  | Sod                                   |                        | Field Grass                                |  | Trees       | Shrubs |
| Structures:  |  | Curb & Gutter     |  | Sidewalk       |  | Signals                    |  | Other                                 |                        |  |  |             |        |
| <b>Construction Schedule</b>   |  |                   |  |                |  |                            |  |                                       |                        |  |  |             |        |
| Estimated Starting dates:  |  |                   |  |                |  | Weekend Dates:             |  |                                       |                        |  |  |             |        |
| Estimated Ending dates:  |  |                   |  |                |  | After Hour Dates:          |  |                                       |                        |  |  |             |        |
| <b>Comments</b>  |  |                   |  |                |  |                            |  |                                       |                        |  |  |             |        |
|  |  |                   |  |                |  |                            |  |                                       |                        |  |  |             |        |
|  |  |                   |  |                |  |                            |  |                                       |                        |  |  |             |        |
| <b>WARNING: Before digging, call Gopher State One -- 1-800-252-1166</b>  |  |                   |  |                |  |                            |  |                                       |                        |  |  |             |        |
| <b>Call the Public works Department for ROW Inspections – 320-365-3444</b>   |  |                   |  |                |  |                            |  |                                       |                        |  |  |             |        |
| Applicants<br>Signature: _____<br><br>Date: _____  |  |                   |  |                |  | Permit Approved By:        |  |                                       |                        |  |  |             |        |
|  |  |                   |  |                |  | Date of Approval:          |  |                                       |                        |  |  |             |        |
|  |  |                   |  |                |  | <b>Permit fees</b>         |  |                                       |                        |  |  |             |        |
|  |  |                   |  |                |  | <input type="radio"/> Cash |  | Fee: \$                               |                        | <input type="radio"/> Check                |  | Penalty: \$ |        |

Please draw a map of work done on reverse side of permit.

# Site Plan Grid

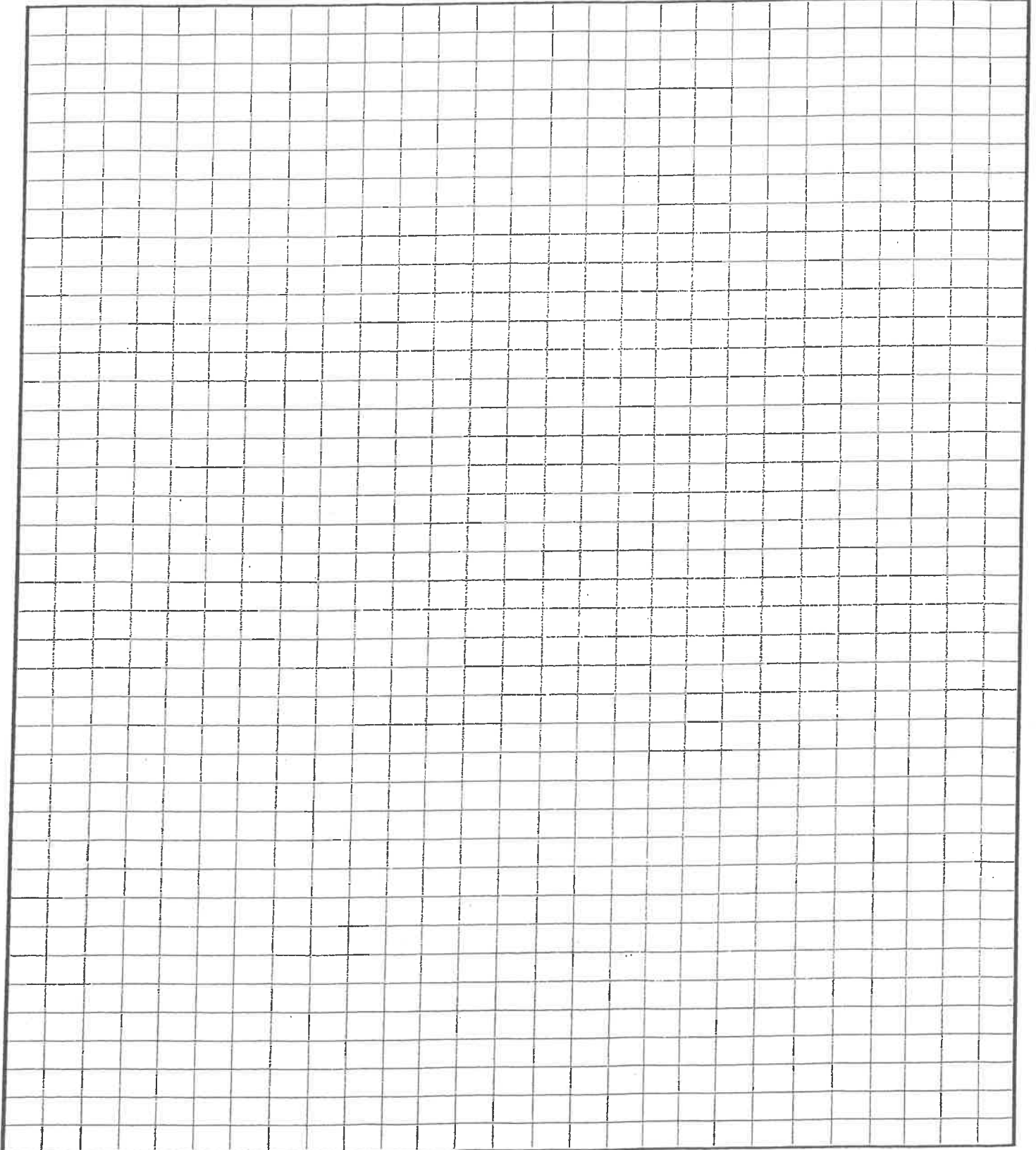
Name: \_\_\_\_\_

Date: \_\_\_\_\_

All sketches must be drawn to scale and contain the following information: North Arrow, all abutting streets and alleys with street names, dimensions of lot or lots, all existing buildings on lots, proposed buildings, and distances from all property lines to existing and proposed buildings and distances from building to building.



Indicate North in the Circle



(See example). Crosshatch all proposed buildings. Label property lines. Scale 1/4" = \_\_\_\_\_.