

DELAWARE COUNTY ENGINEERING DEPARTMENT
7700 EAST JACKSON STREET
MUNCIE, INDIANA 47302
TEL: 765-747-7765 FAX: 765-741-9620

PERMIT NO. _____
DATE _____
RECIPT NO. _____
CASH _____ CHECK NO. _____

RIGHT-OF-WAY USE PERMIT APPLICATION

(MAKE CHECK PAYABLE TO THE DELAWARE COUNTY ENGINEERING DEPARTMENT)

APPLICANT

NAME _____
MAILING ADDRESS _____

CONTACT PERSON _____

PHONE# _____
FAX# _____
UTILITY ID _____
PHONE# _____

LOCATION OF RIGHT OF WAY ACTIVITY

TOWNSHIP _____

ADDRESS _____

OR OTHER DESCRIPTION _____

DATE ACTIVITY WILL START _____

DATE ACTIVITY WILL BE COMPLETED _____

DRIVEWAY & MAILBOX

_____ **DRIVEWAY CONSTRUCTION**

WHAT IS THE PURPOSE OF DRIVEWAY? _____ RESIDENTIAL _____ COMMERCIAL

WHAT TYPE OF MATERIAL WILL BE USED FOR THE DRIVEWAY APPROACH? _____

_____ **MAILBOX CONSTRUCTION**

WHAT TYPE OF MAILBOX WILL BE USED? _____ BREAKAWAY _____ NON-BREAKAWAY

RIGHT-OF-WAY

EXCAVATION: _____ EARTHEN _____ SPECIAL BACKFILL (ROAD) _____ OTHER

OCCUPATION: _____ TRAFFIC CONTROL _____ DUMPSTER PLACEMENT _____ OVER SIZE/WEIGHT LOAD _____ OTHER

DESCRIPTION OF ACTIVITIES: _____

ACKNOWLEDGEMENT OF APPLICATION

PRINT NAME: _____

SIGNATURE OF APPLICANT/CONTRACTOR: _____

DATE: _____

STATE OF: _____

COUNTY OF: _____

Subscribed and sworn to before me, a notary public in and for said county and state, this _____ day of _____, 20____.

Notary Public _____

My commission expires _____

BOND REQUIREMENTS FOR PROTECTION OF STREET FACILITIES:

_____ \$5,000.00 SURETY POSTED BY CONTRACTOR DOING UTILITY WORK

_____ \$500.00 SURETY POSTED BY ADJACENT OWNER (HOMEOWNER)

_____ PUBLIC UTILITY INDEMNIFICATION AGREEMENT POSTED

INDEMNIFICATION AGREEMENT:

The petitioner/applicant hereby agrees to hold harmless, defend and to indemnify Delaware County from or against all claims, damages and expenses, including but not limited to reasonable attorney's fees on any property arising, alleges injury and/or death to any person or damage to any property arising, or alleged to have arisen out of any act of commission or omission on part of petitioners/applicant, his/her heirs, successors or assigns regardless of whether such acts are direct result of the public right-of-way use pursuant to this permit grant. I CERTIFY THAT THE INFORMATION CONTAINED ON THIS FORM IS COMPLETE AND ACCURATE.

OFFICE USE ONLY

INSPECTION FEES

_____ INSPECTION FEE FOR MAILBOX AND DRIVEWAY -- \$20.00

_____ INSPECTION FEE FOR DRIVEWAY ONLY -- \$20.00

_____ INSPECTION FEE FOR MAILBOX ONLY -- \$20.00

_____ INSPECTION FEE FOR SPECIAL EVENTS -- \$20.00

_____ REVIEW PLANS -- \$20.00

_____ INSPECTION FEE \$20.00 TIMES NUMBER OF DAYS NEEDED = \$ _____.

STREET SPECIFICATIONS

_____ CLASS I

_____ CLASS II

_____ CLASS III

_____ CLASS III SUBDIVISION

OFFICE PERSONEL WITNESS: _____