**Encroachment Permit Application**

 **City of Pewee Valley, Kentucky**

# Applicant

Contact Person:

Company:

Address:

City:

State:

Zip:

Office Phone: ( ) -

Cell Phone: (\_ ) -

Fax: (\_ ) -

Email:

**Property Owner**

Name: \_\_\_

Address:

City:

State:

Zip:

Office Phone: ( ) -

Cell Phone: (\_ ) -

Fax: (\_ ) -

Email:

**Project Location**

Address:

City:

State:

Zip:

Location on Property:

**Entrance/Curb Cut**

* Residential
* Commercial/Business

**Utility**

* New Overhead
* New Underground
* Repair/Maintenance

**Building/Grade Work**

* Fill
* Landscape on Right of Way/Easement
* Structure in Right of Way/Easement
* Other

**Pavement Cut**

* Street
* Sidewalk
* Driveway
* Other

**Proposed Start Date:**

**Type of Encroachment**

*(Check all that apply)*

# Encroachment Description:

**\*\*\*\*\*NOTE\*\*\*\*\***

*Please attach a descriptive drawing that shows the encroachment and its relation to any nearby existing utilities and/or structures. Application will not*

*be approved without a drawing.*

# Proposed Completion Date:

**Restoration Plan Attached** □ **Traffic Control Plan Attached** □

(I/We) hereby certify that all the information contained in this application is true and complete to the best of my knowledge and (I/We) will comply with the terms and conditions under which the encroachment permit hereby applied for is issued. Furthermore, (I/We) agree to fully indemnify and hold harmless the City and all of its employees, officials and representatives from any claim, damage or injury to a person or property arising or alleged to arise from any work related to the approved encroachment or work thereof.

**Application Fee: $150.00** ❒ Paid \_\_\_\_\_\_\_\_\_

## Applicant Signature:

**Date:**

**Property Owner Signature:**

**Date:**

Permit is hereby granted to perform such work. A copy of the permit, the application and the specification shall be available at the jobsite at all times. **A BOND IS REQUIRED FOR THIS PROJECT IN THE AMOUNT OF: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

## Permit Approved By:

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

**Final Inspection Approved By:**

**Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Bond Refund Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**(Office Use Only)** Requires Inspection \_\_\_Requires \* Bond/Insurance \_\_\_ Requires Additional Plans (Traffic Control or Restoration) \_\_\_ ⁮

**\*Amount of Bond Required (Payable upon application) $5,000.00** $\_\_\_\_\_\_\_\_\_\_ **File Close Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

# City of Pewee Valley • clerk@peweevalleyky.org

# P.O. Box 769, Pewee Valley, KY 40056

# 502-241-8343 (o) -- 502-241-8348 (f)