

**RIGHT-OF-WAY OR CITY EASEMENT
EXCAVATION PERMIT APPLICATION**

PERMIT NO.

Name and Address of Utility Owner:

Contact: _____
Phone: _____
24-Hour Emergency Phone: _____
Email Address: _____

Name and Address of Party Performing Work:

Contact: _____
Phone: _____
24-Hour Emergency Phone: _____
Email Address: _____

Permit Fee of **\$50.00**

1. Nature of work: Gas Main Telephone Main Cable Main Electric Main
 Gas Service Telephone Service Cable Service Electric Service
 Sewer Line Water Line Drive Approach
 Other: _____

Type of surface to be disturbed: Gravel Bituminous Concrete Boulevard

2. Location (House No., Street, Nearest Intersection, Development Name):

Please attach a plan sketch to this application.

3. Size and kind of pipe, conduit or cable: _____

Length of pipe, conduit or cable: _____ Depth from surface: _____

Dimensions of excavation: _____

4. Method of installation or construction (including method of compaction and excavation):

5. Work to start on or after _____ and to be completed on or before _____

6. Will detouring traffic be necessary? Yes No

If so, describe routing: _____

APPROVAL

City of Kiel

Date

Applicant _____
Signature _____
Date _____