

CITY OF MANSFIELD
RIGHT-OF-WAY ENCROACHMENT PERMIT
APPLICATION FORM

Permitee/Applicant Information **Contractor Information**

Applicant Name: _____
Business Name: _____
Address: _____

City: _____
State: _____ Zip _____ Code: _____
_____ Phone: (_____
_____) Fax: (_____)
_____ Contact _____ Person
Name: _____ Contact _____ Person Phone: (_____
_____) Email Address: _____

Contractor Name: _____
Address: _____

City: _____
State: _____ Zip _____ Code: _____
_____ Phone: (_____
_____) Fax: _____ (_____)
_____ Contact Person Name: _____
_____ Contact _____ Person Phone: _____ (_____)

24-Hour Contact Information

Contact Name: _____ Title: _____
Cell Phone: (_____) _____ Email Address: _____

Site/Work Right-of-way Location

Type of Permit (check all that apply)

- | | | | |
|---|---|---|---|
| <input type="checkbox"/> Shoulder Construction | <input type="checkbox"/> Utility Installation | <input type="checkbox"/> Street Cut | <input type="checkbox"/> Street Bore |
| <input type="checkbox"/> Lane/Road Closure | <input type="checkbox"/> Private Drive Cut | <input type="checkbox"/> Private Drive Bore | <input type="checkbox"/> Drive Construction |
| <input type="checkbox"/> Other (please specify) _____ | | | |

Describe Scope of Work (size, type, length, etc.) _____

TOTAL LENGTH OF AREA IN SCOPE OF WORK: _____ LINEAR FEET

Project Start / Completion Dates and Estimated Project Cost

Project Start Date: _____ End Date: _____ Estimated Project Cost: \$ _____

Special Provisions

Applicant Certification

Applicant agrees to indemnify and hold harmless the City of MANSFIELD and all officers, employees or agents of the City of MANSFIELD against any and all claims, damages, demands, actions, causes of action, costs and expenses of whatsoever nature, which may result from any injury to, or the death of any persons, or from the loss of or damage to, property of any kind or nature, when such injury, death, loss or damage arises out of the construction operation, maintenance, repair, removal or relocation of the facilities covered by the permit.

This permit is requested this _____ day of _____ in the year 2023 .

By Signature

Witness Signature

Printed Name

Title / Position

****** TO BE COMPLETED BY THE PLANNING & DEVELOPMENT STAFF ******

Permission is granted for the above described encroachment in accordance with the plans/drawings attached hereto and made a part thereof. This permit is to be strictly construed and no work other than that specifically described above is hereby authorized.

Application Reviewed By: _____ Date: _____
Planning & Development Review Staff

Permit granted this _____ day of _____ 20 _____.

Permit is hereby: **APPROVED** **DENIED** Comment Reason for Denial: _____

Permit granted by: _____

INSPECTION BY: _____ DATE: _____

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INSPECTION PASSED **INSPECTION FAILED** (specify): _____

RE-INSPECTION BY: _____ DATE: _____ **PASS** **FAIL**

**INSERT
RIGHT-OF-WAY
MAP
HERE**