



CITY OF PICKERINGTON

ENGINEERING DEPARTMENT

51 E. Columbus St, Pickerington, Ohio 43147
P: 614-833-2221 | F: 614-833-2273

PERMIT TO OCCUPY RIGHT-OF-WAY

APPLICATION FORM

FOR OFFICE USE ONLY

PERMIT# _____

APPLICATION DATE _____

EXPIRATION DATE _____

Please complete the following:

APPLICATION FEE PAID YES NO N/A

FINANCIAL SURETY ON FILE YES NO N/A

BOND ON FILE YES NO N/A

INSURANCE ON FILE YES NO N/A

CURRENT TELECOMMUNICATIONS &
UTILITY PERMIT REGISTRATION YES NO N/A

PROPOSED WORK Please select the types of proposed work requiring access to and through the right-of-way.

R/W WORK PERMIT

Repair Replace New Installation Co-location

INSTALL METHOD

Open Cut Tunnel/Boring Re-sleeve

WIRELESS FACILITY / FACILITIES

Repair Replace New Installation Co-location

PROPERTY IMPROVEMENT REQUIRING ACCESS

Examples: Ladder/scaffold in R/W, blocking parking spaces for utility vehicle, temporary outdoor merchandise display, POD moving container, planting in tree lawn, etc.

MAINTENANCE OF TRAFFIC (TEMPORARY WORK)

Example: accessing a manhole in the road for a few hours. This work also requires a separate lane closure permit.

PERMITTEE

COMPANY/FIRM NAME _____

APPLICANT/PERMITTEE/AGENT

COMPANY/FIRM NAME _____

ADDRESS _____

CITY _____ STATE _____ ZIP _____

CONTACT NAME _____ PHONE _____

EMAIL _____ FAX _____

PROJECT ADDRESS & DETAILED LOCATION



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CONTRACTOR *for physical construction* **SAME AS APPLICANT** *Attach additional sheet(s) if multiple contractors*

COMPANY/FIRM NAME _____

ADDRESS _____

CITY _____ STATE _____ ZIP _____

CONTACT NAME _____ PHONE _____

EMAIL _____ FAX _____

PROJECT DESCRIPTION *Provide a detailed description of the proposed work.*

CONSTRUCTION SCHEDULE START DATE _____ FINISH DATE _____

DRAWING OR ENGINEERING PLANS ATTACHED SHOWING LOCATION, PROPOSED WORK AND EXISTING UTILITIES WITHIN WORK AREA, TO BE INCORPORATED AS EXHIBIT A.

GENERAL NOTES ATTACHED, TO BE INCORPORATED AS EXHIBIT B.

In consideration of permission granted, I/We agree to construct said work in all respects in conformity with all applicable codes and regulations of the City of Pickerington. Please remember that the applicant is responsible for coordinating and scheduling the required inspections on these permits.

SIGNATURE OF APPLICANT

DATE

PRINTED NAME

PHONE NUMBER



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PERMIT # _____

Whereas, by submission of its Application for a Permit to Occupy Right-Of-Way, the Applicant agrees to comply with the Right of Way regulations of the City of Pickerington as they exist at the time of application AND as they may be changed from time to time; and

Whereas, by submission of its Application for a Telecommunications and Utility Permit, the Applicant agrees to pay all fees associated with this Permit as they exist at the time of application AND as they may be changed from time to time; and

Whereas, by submission of its Application for a Telecommunications and Utility Permit, the Applicant agrees to pay any fee associated with any applicable Telecommunications & Utility Permit between the Applicant and the City of Pickerington as it exists at the time of application AND as it may be changed by mutual agreement by the parties; and

Whereas the City of Pickerington, having reviewed the Applicant's submission, finds the granting of this Permit to be in the best interest of the citizens of Pickerington;

NOW, THEREFORE, the City of Pickerington grants to the Applicant this Telecommunications and Utility Permit, for access to the public Rights of Way of the City of Pickerington as specifically described in EXHIBIT A, subject to the laws of the United States, the laws of the State of Ohio, and the ordinances of the City of Pickerington, as they exist at the time of application AND as they may be changed from time to time, and any further conditions specified in EXHIBIT B.

This Permit is effective this ____ day of _____, 20__ and shall remain in full force and effect for a term not to exceed _____ from the date of signing.

APPLICATION REVIEWED BY:

CONSTRUCTION MANAGER SIGNATURE

PERMIT APPROVED BY:

CITY ENGINEER SIGNATURE

PERMIT AGREED BY:

APPLICANT SIGNATURE