City of New Haven Engineering Department Form RC-1
P.O. Box 570
815 Lincoln Hwy E.
New Haven, IN 46774
Phone 260-748-7030 Fax 260-748-7075
www.newhavenin.org

Date Approved:_____

Fee: $_____ Permit No._____

Right of Way Cut Application/ Permit

Name of Applicant_____

Address of Applicant _____

_____

Phone Number: Office_____Cell_____

Applicant hereby applies to the Engineering Department for permission to perform certain operations upon the right-of-way of a City of New Haven dedicated street as shown on the map or plan attached herto and by this reference made a part hereof.

( ) Construct, operate and maintain a _____ pole line.

( ) Construct, operate and maintain a _____ buried cable.

( ) Construct, operate and maintain a _____ pipe line

( ) Miscellaneous operations and/or facilities as described

( ) Erect and maintain non-commercial sign

Surety Bond Amount Required _____
Surety Bond Company: _____
Surety Bond Agent: _____

Depth: (_____) inches minimum cover

Cut _____ Push or Bore _____

Trenching or tunneling nearer than _____ ft. to surface portion of road not permitted

POLE LINE, BURIED CABLE, OR PIPE LINE TO BE CONSTRUCTED ALONG OR ACROSS

STREET	Between/at/near and	Side of Road	Distance from		Buried Cable or Pipe	
			Center Line	R/W Line	Depth	Size & Kind

DESCRIPTION AND LOCATION OF MISCELLANEOUS OPERATIONS AND/OR FACILITIES

This permit is issued by the New Haven Engineering Department subject to the terms and provisions contained herin and/or attached hereto and is accepted and approved by applican subject to said terms and provisions.

APPLICANT MUST NOTIFY OFFICE BEFORE COMMENCING WORK: PERMIT VALID FOR 90 DAYS FROM DATE ISSUED.
Applicant: _____
By: _____
Date of Application: _____

CITY OF NEW HAVEN
ENGINEERING DEPARTMENT
Approved By: _____

Effective Date: _____

(Approved as to form and use by the New Haven Board of Public Works & Safety)