



Application for Pipeline Construction New / Repair / Maintenance

New Construction Repair Project Maintenance Project

Permit # _____

Date: _____

Application Fee: \$500 (Non-Refundable)

Pipeline Name: _____

Location: _____

Method of Installation/Repair/Maintenance: Bore Open Cut/Excavation Other: _____
Any cutting, penetrating, or excavation in or within five (5) feet or public right-of-way will also require a right-of-way permit

Start Date: _____ Completion Date: _____

INFRASTRUCTURE / FACILITY OWNER:

Company Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Fax: _____ Cell: _____

E-mail Address: _____

Emergency Contact: _____ Emergency Phone: _____

APPLICANT:

Company Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Fax: _____ Cell: _____

E-mail Address: _____

Emergency Contact: _____ Emergency Phone: _____

CONTRACTOR: (All Contractors must be registered with the City of Dickinson)

Company Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Fax: _____ Cell: _____

E-mail Address: _____

Emergency Contact: _____ Emergency Phone: _____

SUBCONTRACTORS: (All Subcontractors must be registered with the City of Dickinson)

Name: _____ Phone: _____

Name: _____ Phone: _____

Name: _____ Phone: _____

REQUIRED DOCUMENTATION: 3 Sets of each document are required. Incomplete applications will not be accepted.

- Maps (3 Paper, 1 Electronic)
 - Electronic Map **SHALL** be formatted in Shapefile (GIS), AutoCad (DWG), or GPS using the NAD 83 (TX South Central Coordinate System)
 - Area within the City Limits Traversed by Pipeline
 - Route, Distance & Diameter of Pipeline
 - Status of Pipeline (active, inactive, abandoned)
 - Shutoff Valve Locations
 - Owner Name & Address
 - 24 Hour Emergency Contact Number

- Written Scope of Work
- Site plan
- Atypical Crossing Details
- Standard/Typical Crossing Details
- Traffic Plan
- Safety Plan *(during construction and after hours)*
- Storm Water Management / Erosion Control Plan
- ROW Repair and Restoration Plan *(if applicable)*
- Street & Public Driveway Crossing Photographs
- Proof of Commercial General Liability Insurance
- Cash Bond / Letter of Credit* †

*As outlined in Section 8-283 of Chapter 8 Article IX of the City of Dickinson Code of Ordinances.

†May require City Attorney Approval

By signature on this permit application, I understand that the company I represent shall be responsible for the actions of its contractors and subcontractors and shall ensure that all contractors and subcontractors comply with the requirements of the permit and Chapter 8 Licenses and Business Regulations Article IX Pipelines, of the City of Dickinson Code of Ordinances, as amended. I also understand that any violation of the permit or the City's, Licenses and Business Regulations Article IX Pipelines, as amended may result in revocation of the Company's permit.

By signature on this permit application, I agree to update this permit within 10 calendar days after the change occurs if any of the information contained herein changes. I have carefully read the completed permit application, know the same is true and correct, and hereby agree that, if a permit is issued, all provisions of the City ordinances and State and federal laws and the permit will be complied with, whether herein specified or not. I agree to contact Dig Tess, the Texas One-Call System, and all affected utilities and others with facilities in public rights-of-way, prior to commencement of work. I agree to indemnify and forever hold the City of Dickinson harmless against each and every claim, demand or cause of action that may be made or come against it by reason of or in any way rising out of the performance of construction, excavation and /or the closing or blocking of the roadway by the applicant under a permit from the City, if such a permit is granted. I have also read Chapter 8 Licenses and Business Regulations Article IX Pipelines of the City of Dickinson Code of Ordinances, as amended, and agree to comply with the requirements contained therein.

Applicant Name

Applicant Signature

FOR OFFICE USE ONLY BELOW THIS POINT

Galveston Co. WCID #1

Approved Approved As Noted
(Construction May Proceed)

REJECTED Revise & Resubmit

Reviewer: _____

Date: _____

Public Works

Approved Approved As Noted
(Construction May Proceed)

REJECTED Revise & Resubmit

Reviewer: _____

Date: _____

Fire Marshal

Approved Approved As Noted
(Construction May Proceed)

REJECTED Revise & Resubmit

Reviewer: _____

Date: _____

City Administrator

Approved Approved As Noted
(Construction May Proceed)

REJECTED Revise & Resubmit

Reviewer: _____

Date: _____