



# Application for Installation, Replacement, Or Repair of Infrastructure in Public Rights-of-Way

Permit # \_\_\_\_\_

Date: \_\_\_\_\_ Project Valuation: \_\_\_\_\_

Project Name: \_\_\_\_\_

Location: \_\_\_\_\_

Above-Ground Appurtenances?  Yes  No

Method of Installation:  Bore  Open Cut  Overhead  Pole  Other: \_\_\_\_\_

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.

- |                                                            |                                                                            |
|------------------------------------------------------------|----------------------------------------------------------------------------|
| <input type="checkbox"/> Written Scope of Work             | <input type="checkbox"/> Traffic Plan                                      |
| <input type="checkbox"/> Site plan                         | <input type="checkbox"/> Storm Water Management / Erosion Control Plan     |
| <input type="checkbox"/> Standard/Typical Crossing Details | <input type="checkbox"/> Safety Plan (during construction and after hours) |
| <input type="checkbox"/> Atypical Crossing Details         | <input type="checkbox"/> Guarantee of Performance*                         |
| <input type="checkbox"/> ROW Repair and Restoration Plan   | <input type="checkbox"/> Insurance and Indemnity**                         |

\*As outlined in Section 15.6-26 of Chapter 15.6 (Streets and Other Public Rights of Way) of the City of Dickinson Code of Ordinances.

\*\* As outlined in Section 15.6-27 of Chapter 15.6 (Streets and Other Public Rights of Way) of the City of Dickinson Code of Ordinances.

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 15.6, Streets and Other Public Rights-of-Way, of the City of Dickinson Code of Ordinances, as amended. I also understand that any violation of the permit or the City's, Streets and Other Public Rights-of-Way Ordinance, 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 15.6, Streets and Other Public Rights-of-Way of the City of Dickinson Code of Ordinances, as amended, and agree to comply with the requirements contained therein.

\_\_\_\_\_  
Applicant Name

\_\_\_\_\_  
Applicant Signature

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**FOR OFFICE USE ONLY BELOW THIS POINT**  
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<b>Galveston Co. WCID #1</b>	
<input type="checkbox"/> Approved	<input type="checkbox"/> Approved As Noted <small>(Construction may proceed)</small>
<input type="checkbox"/> Rejected	
Reviewer: _____	
Date: _____	

<b>Public Works</b>	
<input type="checkbox"/> Approved	<input type="checkbox"/> Approved As Noted <small>(Construction may proceed)</small>
<input type="checkbox"/> Rejected	
Reviewer: _____	
Date: _____	

<b>Fire Marshal</b>	
<input type="checkbox"/> Approved	<input type="checkbox"/> Approved As Noted <small>(Construction may proceed)</small>
<input type="checkbox"/> Rejected	
Reviewer: _____	
Date: _____	

<b>City Administrator</b>	
<input type="checkbox"/> Approved	<input type="checkbox"/> Approved As Noted <small>(Construction may proceed)</small>
<input type="checkbox"/> Rejected	
Reviewer: _____	
Date: _____	