

City of Lake Ozark

Right of Way Excavation Permit

The undersigned submits the following application and information for the issuance of a Right of Way work permit.

- 1.) Name and Billing address of applicant/company: _____

- 2.) Field Work Contact Name(s) _____

- 3.) Telephone numbers/ Cellular phone numbers: _____

- 4.) Description of work _____

- 5.) Location _____

- 6.) Number of days to complete _____

In consideration of the issuance of the Right of Way work permit, the applicant agrees to abide by the following terms and conditions:

- a.) Abide by the attached written policies concerning work permits as well as all applicable City of Lake Ozark regulations.
- b.) The applicant understands and agrees that a Right of Way permit may be suspended or revoked at the Public Works Directors discretion in the event the applicant fails to abide by the written policy at any time.

Applicant's Signature: _____ Date: _____

Applicant's Printed Name: _____

Office Use

Permit Fee: \$50.00 Date Paid: _____

Deposit Amount: \$250.00 Date paid: _____

Cash Collection Code: 196

Cash Collection Code: 215

Sure Bond Amount Required: \$5000.00

Bond Provided: Y / N

Director Signature: _____ Date: _____ Permit Number: _____