



**City of Perrysburg
 Department of Public Service
 11980 Roachton Road
 Perrysburg, Ohio 43551-2002
 419-872-8020**

**RIGHT-OF-WAY OPENING PERMIT
 APPLICATION AND PERMIT
 (Codified Ordinances Chapter 1020)**

Applicant _____ Phone Number _____

Applicant's Mailing Address _____

Description of proposed work: include exact location, type of pavement, area and depth of proposed excavation and other pertinent details. Provide accurate profile/elevation drawings of permanent structures to be placed in the right-of-way. _____

Location of proposed work _____

Work will commence on or about _____ and will require _____ calendar days

On file with city: Bond? Yes _____ No _____ Certificate of insurance? Yes _____ No _____

The proposed work is shown on the attached permits marked _____

The Applicant does hereby agree that in consideration of the granting of the requested permit the City of Perrysburg will be held harmless from any and all damages, that all construction will be in full compliance with the Ordinances of the City of Perrysburg (Chapter 1020 in particular) and the laws of the State of Ohio and that all statements made herein are true and correct.

 Applicant's authorized signature Title Date

CITY USE ONLY

Application Number _____ Deposit Amount \$ _____ Permit Fee \$ _____

PERMIT APPROVAL

	By	Approved	Disapproved	Date
Department of Public Utilities	_____	_____	_____	_____
Director of Public Service	_____	_____	_____	_____

Work completed in accordance with Chapter 1020: Inspected by _____ Date _____

Deposit refund approved: Date _____ Account number 501-3100-56070 by: _____