

CITY OF CENTRALIA RIGHT-OF-WAY APPLICATION PERMIT

PLEASE FILL OUT FORM and E-MAIL TO:
PublicWorksPermits@cityofcentralia.com

APPLICATION DATE: _____ FORM COMPLETED BY: _____

SITE LOCATION: ADDRESS: _____

OWNER: NAME: _____

MAILING ADDRESS: _____

PHONE: _____ CELL PHONE: _____

CONTRACTOR: NAME: _____

MAILING ADDRESS: _____

PHONE: _____ CELL PHONE: _____

EXISTING STREET SURFACE: _____ DATE WORK WILL COMMENCE: _____

DESCRIPTION OF WORK: _____

READ THE FOLLOWING CAREFULLY BEFORE SIGNING

The applicant shall submit a traffic control plan for approval and a site plan if required with this application. It is the responsibility of the permittee to notify all the contacts on the closure contact list prior to modifying any traffic flow in the public right-of-way and once again after the normal traffic is restored. Work hours shall be 7:00 am-3:30 pm. Other times must be approved by the City Engineer.

INSPECTION IS REQUIRED PRIOR TO BACKFILLING ANY UNDERGROUND UTILITY, POURING CONCRETE, OR ANY SIMILAR SITUATIONS. Note: This permit is revocable by the City Engineer at any time after issuance.

I hereby certify that I am aware of the ordinances regulating the work for which this permit is issued, and that all work done will be in conformance with these ordinances, the City’s Development Standards, and as noted on this permit.

Contractors working within the right-of-way are to provide a Certificate of Insurance with the following minimum liability coverage before this permit becomes effective: 1st Occurrence: 1 million: General Aggregate: 2 million. The City of Centralia must be named as an additional insured on the certificate. The additional insured endorsement must be submitted with the Certificate of Insurance.

Call the One-Call Locate Center at 811 prior to starting any construction.

HOLD HARMLESS AGREEMENT

By signing this application form, I attest that the information provided herein, and in any attachments is true and correct to the best of my knowledge. Any material falsehood or any omission of a material fact made with respect to this application packet may result in this permit being null and void. I, the undersigned, hereby certify that I have reviewed and understand all pertinent and applicable federal, state, county, and City of Centralia laws, regulations, codes and requirements for the proposed project and that the project described in the permit application documents complies with these requirements.

Now, therefore, I hereby agree as a condition of permit issue to hold harmless the City of Centralia, its officers, agents and employees and agree to defend and indemnify from any and all claims, injuries, damages, losses including reasonable attorney’s fees, the City of Centralia, its officers, agents and employees may incur by reason of the issuance of such permit and all other acts taken by the City of Centralia relating to the work described under the permit documents including but not limited to plans examination, issuance of permit(s), inspection and approval of construction to the extent that any such liability, loss and expense results from any negligence of the applicant, his architects, engineers, agents or employees, or from the misrepresentation of any material fact in the permit application documents, whether negligent or intentional.

I further agree to provide access and right of entry to the City of Centralia and its employees, representatives, or agents for the sole purpose of application reviews and any required later inspections. Staff’s access and right of entry will be assumed unless the applicant informs the City in writing at the time of the application that he/she wants prior notice.

Signed: _____ Print Name: _____ Date: _____

(FORM TO BE SIGNED AT TIME OF PAYMENT)

E-mail completed application to: PublicWorksPermits@cityofcentralia.com