

CALL OUPS ☎811

CITY OF CENTERVILLE RIGHT-OF-WAY PERMIT



Phone #: (937) 428-4782

Fax #: (937) 433-0286

PERMIT NO. _____

Work For Excavation Into Any Street, Sidewalk, Alley or Public Right-of-Way

I, (we), the undersigned, _____ do hereby request a permit to excavate in the public right-of-way of the City of Centerville, Ohio as described below:

STREET: _____

Work to begin approximately: _____ and will require _____ days,

for the purpose of: _____

PROVISIONS:

Chapter 1024 (Streets & Sidewalks) of the Code of Ordinances of the City of Centerville, Ohio adopted April 4, 1994 and amendments thereto, shall be fully complied with. Acceptable new or like-new signs, barricades, lights and, if necessary flagmen and watchmen, will be placed on the job for the maintenance of traffic at all times, day and night, during the time this work is being done (per the current Ohio Manual of the Uniform Traffic Control Devices for Construction and Maintenance Operations). All trenches five (5) feet or more in depth shall be sheeted and shored to the satisfaction of the City Engineer. All the above timbering should be removed as the backfilling progresses. No sheeting shall be left in place. Notification of eight hours prior to backfilling or resurfacing must be given to the City.

INSURANCE:

I, (we), assume all responsibility for and will hold the City of Centerville harmless from any and all claims for personal injuries and/or property damage arising from this work. Attached is a Certificate of Insurance showing the type of insurance and limits which I/we currently have in force. The City of Centerville has been named as an additional insured as per your request.

Responsibility under this permit will remain in force until the City has granted a release.

I, (we) herewith enclose the \$50.00 fee and agree to comply with Chapter 1024 of the Code of Ordinances of the City of Centerville, Ohio, and amendments thereto, and the conditions of this application, which I have read.

FOR CITY ONLY:

Deposit for Bond \$ _____ Applicant Signature _____

Permit Fee _____ Applicant _____

Completion Date _____ Address _____

Date _____

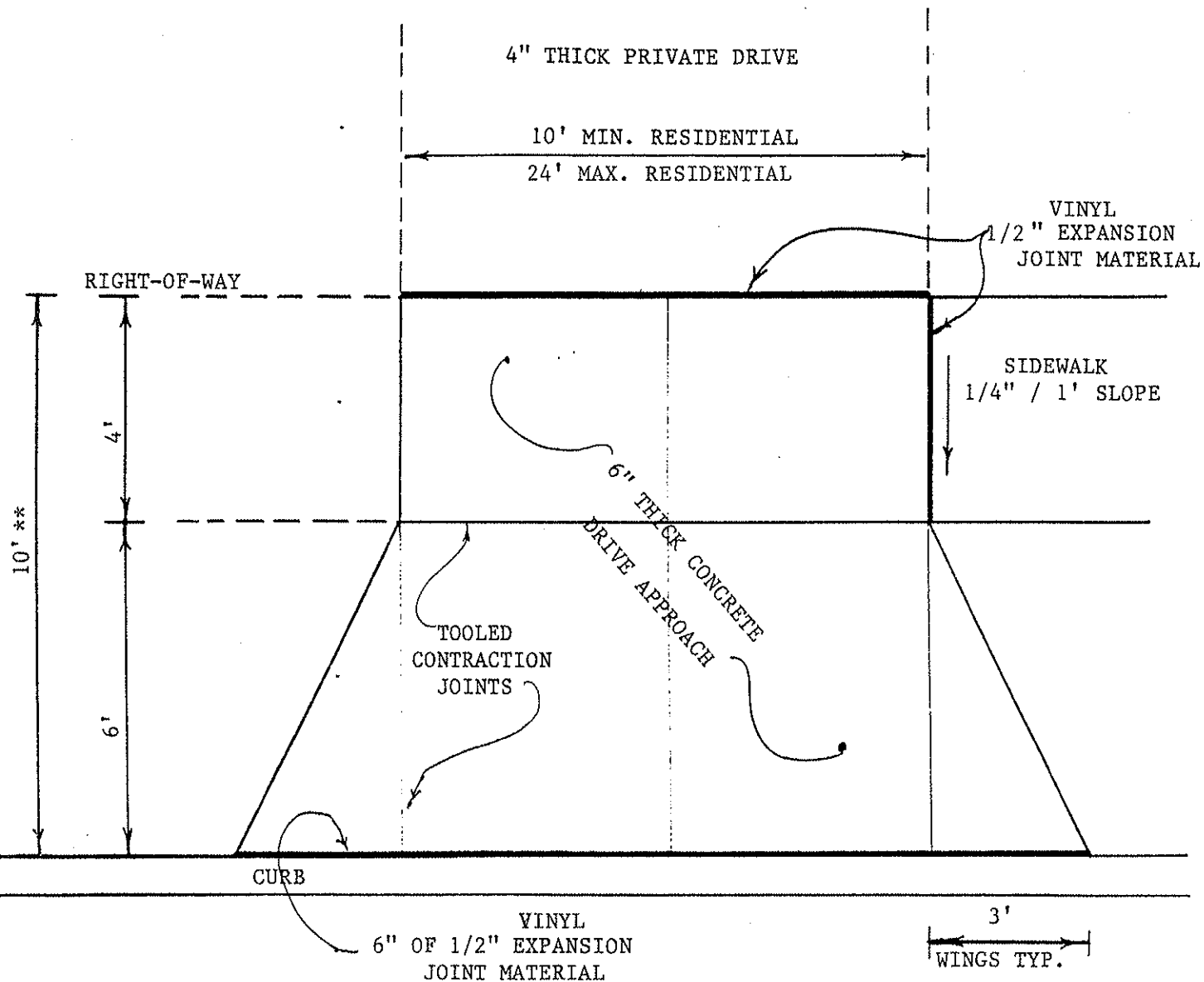
Phone _____

Fax # _____

DATE APPROVED _____

BY _____

Operations Manager



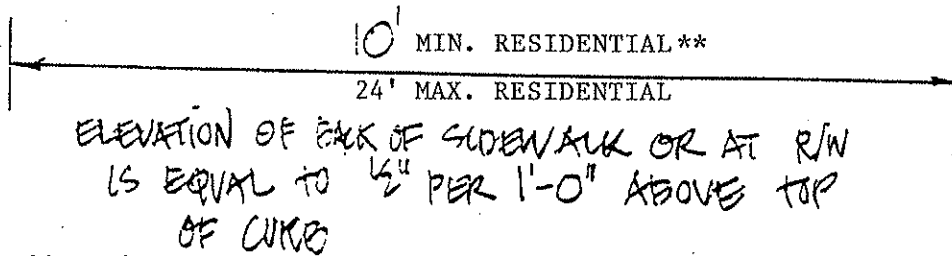
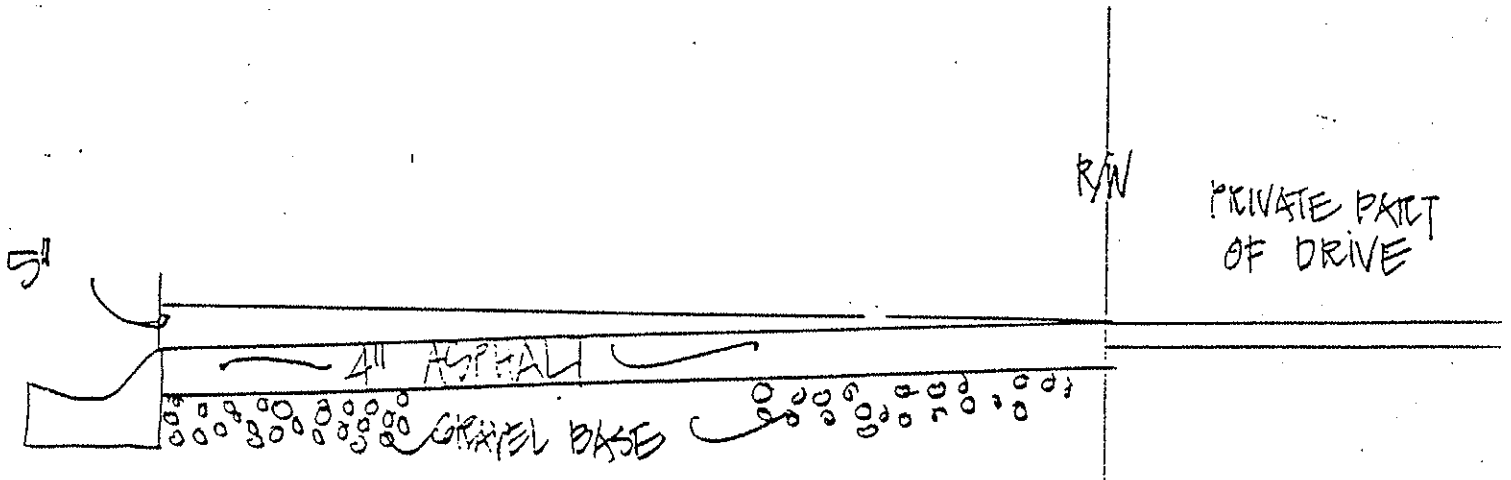
DRIVE APPROACH SLOPE:

- * SET ELEVATION AT R/W 5" ABOVE TOP OF CURB WHICH EQUALS 1/2"/FT
- * SLOPE ACROSS SIDEWALK IS 1/4"/FT
- * REMAINING 4" SLOPE DOWN TO CURB
- IF CURB IS TO BE REMOVED CONTACT CITY INSPECTOR BEFORE BROKEN OUT

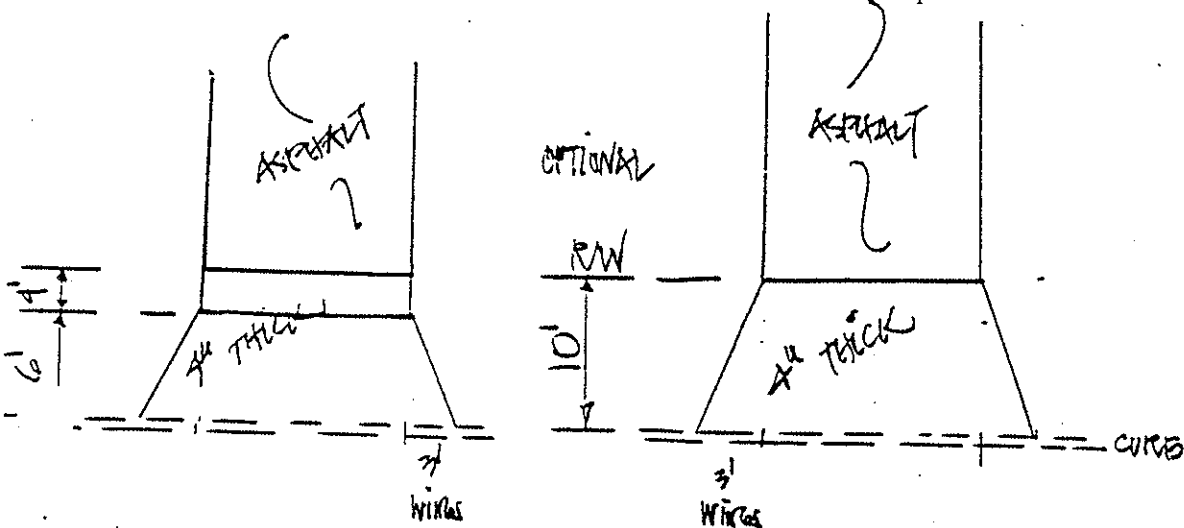
- * 6" THICK CONCRETE DRIVE APPROACH
- * CLASS C CONCRETE ON SUITABLE SUBGRADE OR 3" OF GRAVEL BASE PLACED UNDER APPROACH AS DETERMINED NECESSARY
- * ALL EXPOSED SURFACES SHALL BE BROOMED AND EDGED
- * CURING COMPOUND SHALL BE APPLIED ON ALL FINISHED CONCRETE IN R/W IN ACCORDANCE WITH ITEM 451.10

** Yankee Trace varies see Public Works Inspector

ASPHALT DRIVES



** Yankee Trace varies see Public Works Inspector



PLEASE CALL FOR INSPECTION PRIOR TO PLACEMENT OF ASPHALT