



City of PALM COAST

Community Development Department
Building Services Division

160 Lake Avenue
Palm Coast, FL 32164
386-986-3780

RIGHT-OF-WAY ACCESS & UTILIZATION

PERMIT NUM

DATE

LOCATION	<input type="text"/>
DESCRIPTION OF WORK	<input type="text"/>

NUMBER OF POLES	<input type="text"/>
CABLE	<input type="text"/>
WATER CONSTRUCTION	<input type="text"/>
SEWER CONSTRUCTION	<input type="text"/>
NUM OF FIRE HYDRANTS	<input type="text"/>
• NUM HYDRANT WITHIN 4' OF PAVEMENT EDGE	<input type="text"/>
NUM OF OPEN PITS	<input type="text"/>
• AT OR WITHIN 4' OF ROAD EDGE	<input type="text"/>
• 4.01' TO R/W LINE	<input type="text"/>

JACK & BORE

OPEN STREET CUT (PAVED)

OPEN STREET CUT (UNPAVED)

UNDER CANAL OR DRAINAGE DITCH

OVER CANAL OR DRAINAGE DITCH

Business or Applicant Name: _____

License Holder Name (if applicant): _____ License # _____

Mailing Address: _____

Contact name: _____

Email Address: _____ Phone: _____

City Project? _____ Name of Department _____ Contact Employee _____

APPLICATION IS HEREBY MADE TO OBTAIN A PERMIT TO DO WORK AS DESCRIBED ABOVE. I AGREE TO CONTACT SUNSHINE STATE ONE CALL (800) 432-4770 OR 811 FOR LOCATES. I ASSUME FULL AND TOTAL RESPONSIBILITY FOR COMPLIANCE WITH ALL FEDERAL, STATE AND LOCAL REGULATIONS. I AGREE TO INDEMNIFY AND HOLD HARMLESS THE CITY FROM ANY COSTS THAT OCCUR AS A RESULT OF THE ISSUANCE OF THIS PERMIT AND THE WORK PERFORMED THEREUNDER.

Signature of Applicant

Title

