

PUBLIC WORKS PERMIT

For work within City Public Right-of-Way or Easements
Inspection Request: westlinnoregon.gov/publicworks/engineering-inspection-request
 22500 Salamo Rd. Box 800; West Linn, OR 97068; Ph: (503)722-5500 Fx: (503)742-8652
 Email: cwl_rowpermits@westlinnoregon.gov



PERMIT#

PROJECT LOCATION:	
WORK DESCRIPTION:	

CONTRACTOR					
Business Name: _____					
Address: _____					
City: _____	State: _____	Zip: _____			
Phone: _____	Fax: _____				
CCB: _____	City/Metro _____				
Email: _____					
24 Hour Emergency # _____					

PROPERTY OWNER / FRANCHISE UTILITY					
Applicant Name: _____					
Utility Name: _____					
Address: _____					
City: _____	State: _____	Zip: _____			
Phone: _____	Fax: _____				
Email: _____					
Plans included <input type="checkbox"/>					

WORK INCLUDES (check all that apply):	PERMIT FEE PAYEE: <input type="checkbox"/> CONTRACTOR <input type="checkbox"/> PROPERTY OWNER
Street cut <input type="checkbox"/> Size a' X b' _____ Sidewalk/approach/curb <input type="checkbox"/> Pipe bore <input type="checkbox"/> Trench <input type="checkbox"/> Pipe tap <input type="checkbox"/> Disturb landscape <input type="checkbox"/>	

ATTENTION: Oregon law requires you to follow rules adopted by the Oregon Utility Notification Center. Those rules are set forth in OAR 952-001-0010 through OAR 952-001-0090. You may obtain copies of the rules by calling the center. (Note: the *administrative* telephone number for the Oregon Utility Notification Center is (503) 232-1987). Locate requests shall be made 48 hours prior to any work taking place. The one call number for utility locates is (503)246-6699 or 811.

PERMIT CONDITIONS:

1. I understand that the City's sole function is to review the plans and inspect the work to assure compliance with City code and that the City assumes no responsibility of any kind for the accuracy or suitability of the work submitted. I accept full responsibility for compliance with all applicable city, state, regional, and federal laws, ordinances, franchise agreements, regulations, and codes which apply to the work for which this permit is issued.
2. I agree to inform all contractors, subcontractors, or any other persons performing work under this permit of the provisions of this permit and assure their compliance with those provisions. I agree to ensure that all construction will conform to the City's Public Works Construction Standards, the approved construction drawings, all specific conditions of approval, and any on-site revisions required by the City Engineer.
3. I agree to allow access by City employees or its representatives to the property where construction is being performed.
4. I agree to hold the City of West Linn and its employees harmless from any and all damages or expenses caused by work under this permit and hereby accept all liability for damage to persons and/or property caused in the process of completing this work.
5. I agree to restore the work area or any areas damaged in the course of work to original or better condition, current codes, and to City Engineer satisfaction and to pay all costs to repair or replace any property damaged while work is being performed under this permit and acknowledge that failure to pay these costs when due will constitute a violation of the terms of the permit and the City may avail itself to any and all legal remedies.
6. I understand that an 18 month warranty after final approval is required on all work within the public right-of-way and easements per City code.
7. This permit shall be void if work is not completed within six months of permit issuance.

By my signature below I certify that I have read the foregoing conditions under which the permit is issued, am duly authorized to represent contractor, utility company, and/or owner, and do hereby agree to comply with those conditions and any additional conditions of approval following processing of the permit. Work may not start until plans are reviewed and approved by City.

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Print _____ Authorized Signature _____ Date _____
Minimum 24 hour notice required prior to work and for all inspection requests. Please allow 3-5 days for processing

FEES (per WLMC 3.255)	
Non-refundable application fee	\$ 116
Review/Inspection Deposit1	\$ 500
Street Cut Deposit1 (linear ft. X \$50) =	\$ \$
TOTAL:	

DO NOT WRITE IN THIS SPACE

1. Deposits cover plan review and inspection work by the City. Any amount remaining in the deposit will be refunded to the permittee. Any overruns will result in additional billing.