



CITY OF WATERTOWN  
 309 Lewis Avenue South  
 PO Box 279  
 Watertown, MN 55388  
 Phone: 952-955-2681 . Fax: 952-955-2695

PERMIT NO. \_\_\_\_\_

RIGHT-OF-WAY OR CITY EASEMENT **UTILITY PERMIT** APPLICATION

Name and Address of Utility Owner:

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Contact: \_\_\_\_\_

Phone: \_\_\_\_\_

24-Hour Emergency Phone: \_\_\_\_\_

Name and Address of Party Performing Work:

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Contact: \_\_\_\_\_

Phone: \_\_\_\_\_

24-Hour Emergency Phone: \_\_\_\_\_

1. Nature of Work:  Gas Main     Telephone Main     Cable Main     Electric Main  
 Gas Service     Telephone Service     Cable Service     Electric Service  
 Residential Drop  
 Other \_\_\_\_\_

Type of Surface to be Disturbed:  Gravel     Bituminous     Concrete     Boulevard

2. Location (House No., Street, Nearest Intersection, Development Name): \_\_\_\_\_

(Attach 5 copies of scaled drawings showing accurate right-of-way information, topographic information, and planned installation.)

**Note: Adequate area should be included in the permitted area for the loading and unloading of trucks.**

3. Size and kind of pipe, conduit or cable: \_\_\_\_\_

Length of pipe, conduit or cable: \_\_\_\_\_    Depth from Surface: \_\_\_\_\_

Dimensions of Excavation: \_\_\_\_\_

Installing utilities in existing conduit

4. Method of Installation or Construction (including method of compaction and excavation) \_\_\_\_\_

\_\_\_\_\_

5. Work to start on or after \_\_\_\_\_ and to be completed on or before \_\_\_\_\_ .

6. Will detouring of traffic be necessary?  Yes     No    If so, describe routing: \_\_\_\_\_

\_\_\_\_\_

For \_\_\_\_\_  
(Applicant)

Signed By \_\_\_\_\_

Dated \_\_\_\_\_

The date when the work is completed must be reported to the person designated by the municipality.

*For Office Use Only*

Total feet from question #3: \_\_\_\_\_

\_\_\_\_\_ \$400 for the first 300 feet

\_\_\_\_\_ Residential Drop

\_\_\_\_\_ \$0.25 per foot beyond 300 feet

\_\_\_\_\_ Installing utilities in an existing conduit

\_\_\_\_\_ **Total Amount Due**