



City of Medina  
2052 County Road 24  
Medina, MN 55340  
763-473-4643  
www.medinamn.gov

# RIGHT-OF-WAY PERMIT APPLICATION

**Location:** \_\_\_\_\_  
*(Property address, street or distance and direction from nearest public street intersection)*

**Applicant is:**    \_\_\_ Contractor    \_\_\_ Owner    \_\_\_ Registered Right-of-Way User

**Name of Organization Performing Work:** \_\_\_\_\_

**Applicant Name:** \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_

State: \_\_\_\_\_ Zip: \_\_\_\_\_ Phone #: \_\_\_\_\_

**Contact Person:** \_\_\_\_\_

Emergency (24 hr.) Phone #: \_\_\_\_\_ Daytime Phone #: \_\_\_\_\_

E-Mail Address: \_\_\_\_\_

**Work to start on or after:** \_\_\_\_\_ **and shall be completed by:** \_\_\_\_\_

**Nature of Work:** \_\_\_\_\_

**Method of Installation or Construction:** \_\_\_\_\_

**Type of Work** *(Choose all that apply):*

<u>Existing Development</u>	<u>New Development</u>
Excavation, number of holes _____	Excavation, number of holes _____
Trench Base, number of lineal feet _____	Trench Base, number of lineal feet _____
Obstruction, number _____	

**Indicate below items to be affected/disturbed and include information on drawing or plan of work to be done.**

- |                      |  |
|----------------------|--|
| ___ Grass/Boulevard  | ___ Street/Curb and Gutter                         |
| ___ Trails/Sidewalks | ___ Public Utilities (sewer, water)                |
| ___ Ponds/Wetlands   | ___ Private Utilities (gas, electric, cable, etc.) |
| ___ Drainage         | ___ Other _____                                    |

*(See Other Side)*

Are lane closures or detouring of traffic necessary?  Yes  No

If yes, state duration and suggested route for each instance. Please attach a detour map and /or traffic control plan:

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*Detours: All detour plans and/or traffic control plans are required as part of this permit and must be pre-approved in writing by the Public Works Department. The City Engineer shall be notified in writing at least three (3) working days in advance of any approved detour being established, changed or discontinued.*

Are you approved as an Invoice Contractor?  Yes  No

If yes, are the fees for this permit to be invoiced?  Yes  No

Work shall not commence before 7:00 a.m. nor extend beyond sundown Monday through Friday. On Saturdays, the hours will be from 8:00 a.m. to 6:00 p.m. No work is to be done on Sundays.

*By accepting the Right-of-Way Permit, permittee agrees: (1) to abide by the permit terms and the City's Right-of-Way Ordinance, (2) to pay all applicable fees and provide any required insurance, and (3) to indemnify and hold harmless the City, its officials, employees and agents from any liability, claim or damage including reasonable attorney's fees arising out of the Permittee's actions or inaction undertaken pursuant to the permit.*

Signed: \_\_\_\_\_ Title: \_\_\_\_\_

Date: \_\_\_\_\_

**City of Medina Use Only**

Permit #: \_\_\_\_\_ Permit Fee: \$ \_\_\_\_\_

Inspector: \_\_\_\_\_

Final Inspection Required:  Yes  No

Date of Inspection: \_\_\_\_\_ Final Inspection: Approved / Not Approved

Comments: \_\_\_\_\_

\_\_\_\_\_