



10631 MAIN STREET
PHONE: 815-623-2829 FAX: 815-623-1360

RIGHT-OF-WAY CONSTRUCTION & REPAIR PERMIT

Permit No. \_\_\_\_\_ Date: \_\_\_\_\_

Applicant's Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Applicant's Address: \_\_\_\_\_

Email: \_\_\_\_\_

Work to be done by: \_\_\_\_\_ Phone: \_\_\_\_\_

Description of work: \_\_\_\_\_

Location of Construction: \_\_\_\_\_

I hereby certify that I have read and understand the Ordinances of the Village of Roscoe relating to the proposed work, and that I will comply with the provisions of said Ordinances.

REFERENCE: Village of Roscoe Ordinance §93.15 or §157.04 (Utilities)

Further, I agree that if I shall injure or alter, for any purpose whatsoever, any pavement of any street, alley, sidewalk, curb or gutter or any part thereof, or dig any hole, trench, ditch or drain, or dig or remove any sod, stone, curb, earth, sand or gravel from any street, alley, sidewalk, parkway or other public property, that I shall be responsible and liable to the Village for damages to persons or property in consequence thereof which the Village shall suffer or be adjudged to pay.

Further, I agree to repair all damages to any street or improvement that may arise due to operations by me or my agents, and I further agree to hold the Village harmless against all claimants for any injuries to persons or property occasioned by, or in any manner resulting from my operations on the property.

NOTE: All roadway cuts must be saw cut. No broken curbs are allowed. Traffic control will be in accordance with Section 700 of the Illinois Highway Standards and Division 700 of the IDOT Standard Specifications for Road and Bridge Construction. Trench must be covered or plated during non-working hours if possible.

Right-of-Way Construction & Repair Permit: \$100.00 Inspection Fee: \$200.00 Total: \$300.00

SIGNATURE OF APPLICANT: \_\_\_\_\_

FOR OFFICE USE ONLY

SUBMIT WITH APPLICATION: DRAWINGS [ ] PERFORMANCE SECURITY [ ] PROOF OF INSURANCE [ ]

APPROVAL:

Village Engineer: \_\_\_\_\_ Date Approved \_\_\_\_\_

Village President: \_\_\_\_\_ Date Approved \_\_\_\_\_

Village Clerk: \_\_\_\_\_ Date Approved \_\_\_\_\_

Amount Due: \$ \_\_\_\_\_ Cash \_\_\_ CC \_\_\_ Check No \_\_\_\_\_ Receipt No. \_\_\_\_\_

CC: VILLAGE ENGINEER