Fee: \$ 0.00 Waived for sidewalk replacement

Permit No	
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RIGHT OF WAY EXCAVATION PERMIT

(This form must be filled out completely before your application will be accepted.) 1. Location of Work (Street Address and closest intersection):_____ 2. Nature of Work to be Done: 3. Start Date: _____ Completion Date: _____ 4. Contractor/Utility Name: Telephone: 5. Contact Person: _____ Address: I (We certify that I (we) am (are) familiar with applicable state and local codes, ordinances, standards, the procedural requirements of the City of Panora, and have submitted all the required information which is true and accurate. I (We) also agree to hold the City of Panora harmless against any and all liability, loss, cost, damage or expense which may occur to the City because of the negligence or misconduct in the performance, or lace of performance, of any work by the applicant or applicant's agent. ______Date: _______
(Contractor/Utility or Owner Signed by: ____ and: ______ Date: _____ (Applicant) _____ Date: _____ and:

Work will not be considered complete until all of the area disturbed is repaired to City Standards. For additional information see Chapter 141 Prow Management of the City Code.

City Approval: _____ Date: _____

(Contact Person)