



**APPLICATION
FOR STREET OPENING/RIGHT-OF-WAY CONSTRUCTION PERMIT**

Deposit required: _____

PERMIT
FEE PAID: \$25.00/ \$10.00
DATE: _____

To The City Manager, Miamisburg, Ohio:

Request is hereby made to excavate within the street right-of-way located at _____
for one or more of the following reasons:

PERMIT TO:	Repair	<input type="checkbox"/>	Remove	<input type="checkbox"/>	Replace	<input type="checkbox"/>	Install	<input type="checkbox"/>
	Sidewalk	_____	Telephone Lines	_____				
	Curb	_____	Storm Sewer	_____				
	Curb/Gutter	_____	Sanitary Sewer	_____				
	Gas Lines	_____	Water Lines	_____				
	Driveway Apron	_____	Other	_____				

I intend to start work on _____, and agree to put the above mentioned work back in acceptable condition on or before _____.

It is my understanding that the work will be inspected by the City Engineer of Miamisburg, Ohio. If my work does not meet with his approval, I will remove and replace the same to his satisfaction. This will be done entirely at my expense. During the time the above mentioned work is started, and until it is inspected and approved by the City Engineer, I will assume any and all liability that might arise in connection with this work.

Approved by Engineering Dept.
By: _____
Date: _____

PRINTED: _____
Applicant
SIGNED: _____
Applicant
COMPANY: _____
PHONE: _____
EMAIL: _____

The above signed Applicant is hereby granted permission to do work within the street right-of-way. If the completed job does not meet with the City Engineer's approval, the Applicant may be charged with violation of Chapter 901 of the Codified Ordinances of Miamisburg, Ohio.

NOTE: Call Engineering, 847-6531, **AFTER** setting SCG forms and **BEFORE** pouring.

**ALL RESTORATION MUST
BE DONE IN 30 DAYS
CLASS "C" CONCRETE**

ENGINEERING DEPARTMENT
20 E. Central Ave., Miamisburg, OH 45342
Phone No.: (937) 847-6531
E-mail: engineer@cityofmiamisburg.com