## CITY OF SARTELL, MINNESOTA APPLICATION FOR EXCAVATION PERMIT

- 1. Permits will be issued only to contractors bonded and insured in accordance with Ordinance No. 85-1 or to public utility corporations licensed in accordance with Ordinance No. 48A.
- 2. The Contractor shall file this Application with the City Clerk no less than 24 hours in advance of commencing his operations unless the Contractor is a public utility in an emergency situation. Failure to do so may result in the City requiring the trench to be re-opened. He shall also contact all utility companies and be responsible for location of their facilities.

3. Purpose of Excavation.  Water  Power Line or Service  Sanitary Sewer	(Size, type of pipe or cable)	
Samary SewerTelephone Line or ServiceGas Main or ServiceCable TV		
Other (describe)  4. Location of Excavation. a) Will street be disturbedyesno		N
b) If so, surface in place is:	Lot:Block:	<u> </u>
c) Method of Installation:	Addition:	
Open Trench	Address:	9
Jacking Boring Plowing	Owner:	
	Inspected by	Date
5. Additional plans for this project:		
are attached hereto. are not attached.	It is expected we will begin construction on	
are not attached.	and complete restoration on	
<ul><li>6. The Contractor hereby states that he is familiar with Devices and that he will comply with its requirements. The Corapproval from the City.</li><li>7. It is also agreed that the applicant will restore all other contracts.</li></ul>	ntractor shall erect signs for any detours necess	sary after receiving
existed prior to the making of the excavation. All restoration will		
8. Notice, Failure of the Contractor to properly and co enforcement by the City of its Ordinance.	mpletely repair disturbed property within 48 h	ours may result in
9. The applicant hereby states that his is familiar with provisions and any requirements of the Public Works Director.	the provisions of Ordinance No. 85-1 and will	comply with these
Applicant:	If any utility is hit, please contact City Hall immediately!	
(Type or print clearly)		
Address:	CITY OF SARTELL, MII (320) 253-2171	NNESOTA
By: Name:(Type or print clearly)	Dated:	
Signature:	Received By:	
	City Clerk	
Date:Applicant: White Public W	orks Director: Yellow File: Pink	