

Bureau of Architecture and Engineering Department of Environmental Services City Hall Room 225B, 30 Church Street Rochester, New York 14614-1290 www.cityofrochester.gov

## **RIGHT-OF-WAY PERMIT APPLICATION**

| Applicant Name:   |  | Contact Name:  |  |  |
|---|--|--|--|--|
| A 11  |  | Address:   |  |  |
| Telephone:  |  |  |  |  |
| Fax/Pager/Cell:   |  | Fax/Pager/Cell:  |  |  |
| Excavation (includes Street Obstruction/Ba Driveway Work (Rest Water Service Abande Hydrant Use Above Surface Encrot Marquee, Flagpole, B | Permit Ty new water or new wa rricade arface, Widen, New conment achment (Arch. Deta alcony, Fire Escape, ament (Footings, Fou icle, Building) | pe (Please Check One):   |  |  |
|   |  |  |  |  |
|   |  |  |  |  |
| Address (Number & Street)   | Size of Cut  | Impact Area (check all that apply) Sidewalk Pavement Tree-lawn Driveway  ——————————————————————————————————— |  |  |
|   |  |  |  |  |

Phone: 585.428.6848 Fax: 585.428.6291 TTY: 585.428.6054 EEO/ADA Employer ❽



## Application for Right-of-Way Permit Page 2

| Are drawings attached to this application  | n?Yes                           |            | _No         |
|--|---------------------------------|------------|-------------|
| Dates of Proposed Work: From   | To:                             |            |             |
| Is proposed work being done in conjunc   | etion with City street project? | Yes _      | No          |
| If yes, please identify street project:  |                                 |            |             |
| If granted a permit for the proposed work Standards for Work in the Right-of-Way permit. |                                 |            |             |
| Signature of Applicant   |                                 | Dat        | e           |
| Below this line for internal use only  |                                 |            |             |
| Monument Review # of Monuments Impacted:   | Monument Sheet Attached         | Yes        | _ <i>No</i> |
| Signature of Maps & Surveys Represent  | tative                          | <br>Date   |             |
| Project Review Work Approved: Yes No   | Work Begin Da<br>Work End Date: |            |             |
| Special Conditions:  |                                 |            |             |
|  |                                 |            |             |
| Signature of Project Engineer  | _                               | Dat        | e           |
| Permit Office Review   |                                 |            |             |
| Signature of Inspector   |                                 | Dat        | e           |
| Fire Dept. Review for Sidewalk Café Bo   | oundary                         |            |             |
| Signature  |                                 | ——<br>Date | e           |