

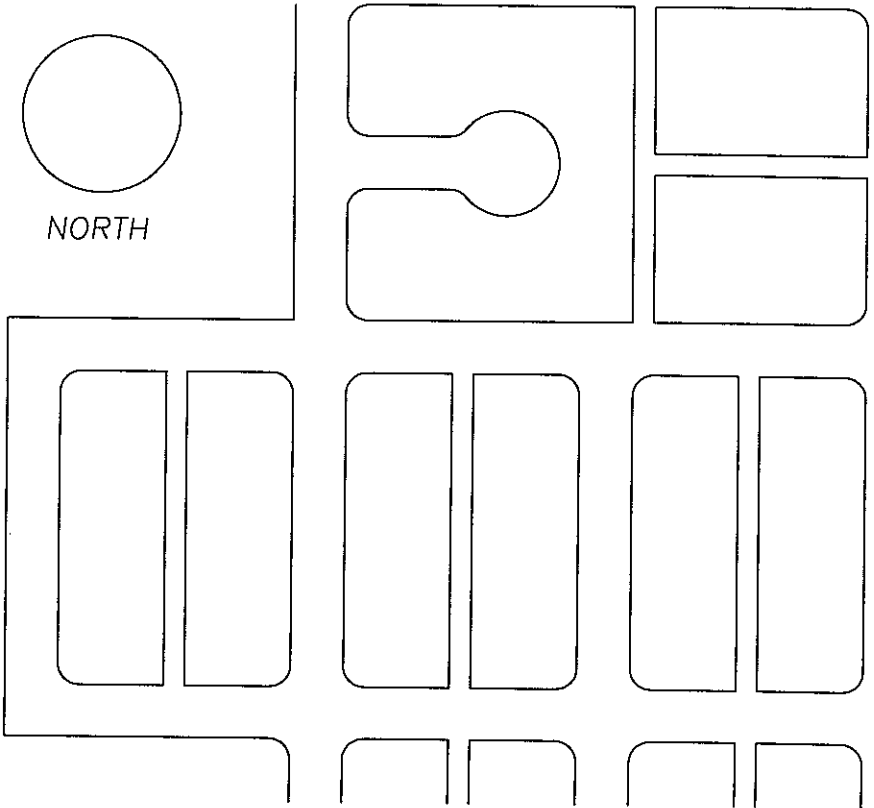
CITY OF ALAMOGRODO

APPLICATION AND RIGHT OF WAY EXCAVATION PERMIT

Date: _____ License No.: _____ License Classification: _____
 Owner of Utility: _____ Permit No.: _____
 Location of Work: _____ Permit Fee: _____
 Type of Work: _____ Contractor: _____
 Contact Person: _____ Phone No.: _____

Reference Point Legend

- Property Corner NORTH
- Manhole Lid
- Water Valve
- Fire Hydrant
- Back of Curb



I, _____, HAVE READ AND UNDERSTAND THE REQUIREMENTS CONTAINED IN THE "RIGHT OF WAY EXCAVATION REGULATIONS" AND WILL FOLLOW ALL PROCEDURES AND REQUIREMENTS CONTAINED THEREIN.

TESTING SHALL COMPLY WITH SECTION 1.2.3.9 OF THE EXCAVATION REGULATION FOR THE WORK TO BE CONSIDERED SUBSTANTIALLY COMPLETE OR COMPLETE.

PERMIT IS NULL AND VOID IF WORK HAS NOT BEGUN WITH-IN ONE (1) CALENDAR WEEK FROM THE DATE OF PERMIT ISSUANCE. (SECTION 2.1.9.).

Contractor Signature/Date

PW Inspector Authorization/Date

FOR INTERNAL USE ONLY

COMMENCEMENT DEADLINE: _____

SEWER/WATER TAP DATE: _____

COMPLETION DEADLINE: _____

BASE COURSE DATE: _____

PRE-FINAL DATE: _____

FINAL DATE: _____