CITY OF NELSON

RIGHT-OF-WAY ENCROACHMENT PERMIT APPLICATION FORM

Permitee / Applicant Information	Contractor Information
Applicant Name:	Contractor Name:
Business Name:	
Address:	
City:	City:
State:Zip Code:	State:Zip Code:
Phone: ()	Phone: ()
Fax: ()	Fax: ()
Contact Person Name:	Contact Person Name:
Contact Person Phone: ()	Contact Person Phone: ()
Email Address:	Email Address:
24-Hour C	Contact Information
Contact Name:	Title:
	Email Address:
Site/Work F	Right-of-way Location
Type of Pern	nit (check all that apply)
□ Shoulder Construction □ Utility Installation	on □ Street Cut □ Street Bore
☐ Lane/Road Closure ☐ Private Drive Co	
□ Other (please specify)	
Describe Scope of Work (size, type, length, etc.)	
TOTAL LENGTH OF AREA IN SCOPE OF WORK:	LINEAR FEET
Project Start / Completio	n Dates and Estimated Project Cost
	n Dates and Estimated Project Cost
Project Start / Completion Project Start Date:End Date:	n Dates and Estimated Project Cost

Applicant Certification			
Applicant agrees to indemnify and hold harmless the City City of Nelson against any and all claims, damages, der of whatsoever nature, which may result from any injury damage to, property of any kind or nature, when succonstruction operation, maintenance, repair, removal or	mands, actions, causes of action, costs and expenses to, or the death of any persons, or from the loss of or ch injury, death, loss or damage arises out of the		
This permit is requested thisday of	in the year 2025,		
By Signature	Witness Signature		
Printed Name	Title / Position		
*** TO BE COMPLETED BY THE CITY	STAFE ***		
**** TO BE COMPLETED BY THE CITY	STAFF """		

Application Reviewed By:			Date:
City Staff Permit granted this	day of	20	
Permit is hereby: APPROVI	ED DENIED	□ Comment	□ Reason for Denial:
Permit granted by:			
INSPECTION BY:		DATE:	
INSPECTION PASSED			
RE-INSPECTION BY:		DATE:	□ PASS □ FAIL

