



Permit #: \_\_\_\_\_

## Approval Permit Application Form

To occupy or temporarily use a Town-owned roadway, right-of-way, sidewalk or storm-sewer connection. A Certificate of Insurance must be provided. **Fee: \$80.00** Code RDS05.

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### Permit Request Type

Roadway Occupation  Right-of-Way  Sidewalk Occupation  Storm Sewer Hook-Up

Un-Assumed Road Allowance Improvements: Follow with Schedule: A B C D (Circle One)

### Applicant Information

Applicant Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Telephone: \_\_\_\_\_ Fax or Email: \_\_\_\_\_

### Contractor Information

Applicant Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Telephone: \_\_\_\_\_

### Location of Work

Address: \_\_\_\_\_

Brief description of project: \_\_\_\_\_

Sketch Provided: Yes  No

Other approvals required: Yes  No  If "yes", from who: \_\_\_\_\_

## Commencement of Work

Work will commence (day, month, year): \_\_\_\_\_

Work will be completed (day, month, year): \_\_\_\_\_

- Traffic will be: Maintained  Closed  Closed Partially  Open
- Where pavement is crossed, it will be: Augured  Bored/Jacked  Open Cut  Other
- Book 7 of the Ontario Traffic Manual Temporary Conditions Plan & Number:
- Liability Insurance information included:
- Drawing or As-Built included:

## Authorization (Does Not Apply to Un-Assumed Road Allowance Improvements)

The Applicant herewith warrants that all workmanship and materials placed under this approval shall be maintained and guaranteed for a period of two years from the date of completion of the work or one year from completion of permanent repair, whichever is longer.

The Applicant and the Contractor have read the Schedule outlining procedures, liabilities, traffic control, temporary re-instatement, permanent re-instatement, class of restoration and municipal prerogative.

**NOTE:** Un-Assumed Road Allowance Improvements must be completed within 1 year of receiving approval to proceed. Any expansion to this application or any further work after approval will require applying for an additional permit.

I have read the information contained on this form and attached a certificate of insurance

Application Date: \_\_\_\_\_ Applicant Position: \_\_\_\_\_

Applicant Name: \_\_\_\_\_ Applicant Signature: \_\_\_\_\_

## Collection of Information

Personal information on this application form is collected under the legal authority of the Municipal Act, S.O. 2001, c.25, as amended. The information is collected for the purpose of gathering applicant contact details and is pursuant to Section 27 of the Municipal Freedom of Information and Protection of Privacy Act. For questions about how this information is collected please contact the Town of Huntsville Roads Department.

**Municipal Approval:** On the basis of this application and all pertinent Schedules and By-laws and notwithstanding any other liability, approval, regulation, By-Law or Provincial stature, the Applicant is herewith approved to proceed with the permit work as requested. Restoration shall be in accordance with a Class \_\_\_\_\_ Procedure. Inspection Date: \_\_\_\_\_

Comments: \_\_\_\_\_  
\_\_\_\_\_

Date: \_\_\_\_\_ Signed: \_\_\_\_\_ Position: \_\_\_\_\_