

# RIGHT OF WAY / SIDEWALK PERMIT APPLICATION

**Submit Applications to: [Permits@rumrivercc.com](mailto:Permits@rumrivercc.com)** Scheduling: 763-331-7722

**THIS APPLICATION BECOMES A NUMBERED PERMIT AFTER THE REVIEW IS COMPLETE AND PAYMENT OF FEES.  
WORK IS NOT TO BEGIN PRIOR TO ISSUANCE. ALL INFORMATION IS REQUIRED AND MUST BE COMPLETED.**

SITE ADDRESS \_\_\_\_\_ PROPERTY ID # \_\_\_\_\_

PROPERTY OWNER NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_ CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

PHONE # \_\_\_\_\_ EMAIL \_\_\_\_\_

APPLICANT IS THE:    **CONTRACTOR**    **OWNER** ~    **PROPERTY TYPE:**    **COMMERCIAL**    **RESIDENTIAL**

CONTRACTOR COMPANY NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_ CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

PHONE # \_\_\_\_\_ EMAIL \_\_\_\_\_

APPLICANT NAME \_\_\_\_\_ PHONE # \_\_\_\_\_

**RIGHT OF WAY                      SIDEWALK**

PROJECT DESCRIPTION: \_\_\_\_\_

**BE SURE TO:**

- 1. COMPLETE AND SUBMIT PAGE 2 OF THIS APPLICATION.**
- 2. CALL GOPHER ONE. CALL FOR UTILITY LOCATIONS BEFORE YOU DIG:**  
**METRO AREA: 651-454-0002 ~ OUTSIDE METRO AREA: 1-800-252-1166**

**\*OFFICE USE ONLY\***

DATE **ALL** REQUIRED INFORMATION WAS RECEIVED: \_\_\_\_\_

**APPROVALS:**

ZONING \_\_\_\_\_ DATE \_\_\_\_\_

**PAYMENT INFO:**

PAYMENT RECEIVED BY \_\_\_\_\_ TOTAL PERMIT FEE \$ \_\_\_\_\_

CASH \_\_\_\_\_ CK# \_\_\_\_\_ LAST 4 CC# \_\_\_\_\_

RECEIPT #: \_\_\_\_\_ DATE \_\_\_\_\_

PROVIDE AERIAL SKETCH OF PROPERTY WITH PROPOSED STRUCTURES, SHOW DISTANCE BETWEEN PROPERTY LINES AND STRUCTURES



SITE ADDRESS \_\_\_\_\_

The undersigned acknowledges the above information is correct and accepts responsibility for compliance with all applicable laws and ordinances of the ruling jurisdiction.

APPLICANT SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

**ZONING USE ONLY:** \_\_\_\_\_ WIDTH IN ROW \_\_\_\_\_ WIDTH OUTSIDE OF ROW  
\_\_\_\_\_ SURFACE MATERIAL \_\_\_\_\_ SETBACKS \_\_\_\_\_ IMPERVIOUS SURFACE

OTHER NOTES:  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_ DATE \_\_\_\_\_

ZONING APPROVAL