APPLICATION FOR UTILITY CONSTRUCTION WITHIN THE PUBLIC RIGHT-OF-WAY GARRETT COUNTY MARYLAND

A COPY OF THIS PERMIT SHALL BE ON-SITE AT ALL TIMES

Application / Permit No.:	Date:	Expiration:	_	
SECTION I - TYPE OF PERMIT REQUEST (C	Check One Only)			
Electric Gas Telephone	Cable Water	Sewer Fiber Optic Ext	ension	
Other				
Remarks / Reason for need of extension:				
SECTION II - UTILITY COMPANY INFORMA	ATION			
Name:	Company:			
Telephone No.:				
Address:	Emai	Email Address:Unit:		
Address:City:	State:	Zip Code:		
SECTION III - LOCATION & DESCRIPTION				
A. LOCATION OF WORK				
Road Name:				
From:				
B. DESCRIPTION OF PROPOSED UTILITY V		··		
Routine Maintenance & Repair of Existing		☐ Construction/Relocation of Underground	l Utilities	
Construction/Relocation of Aerial Utilities		Other (Specify)		
Description of proposed work (including types a	and sizes of pipes and condu	uit):		
Anticipated Start Date:	Duration of Work:			
C. PROJECT SPECIFIC CONTACT INFORM				
Name:	Talanhana Na .			
Title:	Fax No.:			
SECTION IV - CERTIFICATION It is hereby agreed and understood that in consideration of the approva County's Utility Ordinance and Specifications and all other applicable C Garrett County Roads Department; and that all plans and other docum made a material part of this application. In addition to submitting the rebeing applied for. All fees, bonds must be provided in advance of permits.	County, State, Federal laws, rules, reg ents submitted by the applicant for ap quired forms, Garrett County Roads I	pulations and ordinances, and subject to the inspection and contro proval by the Roads Department in connection with this applicati	ol of the on are herby	
I further agree to save, indemnify and hold harmless the Board of Cour others working on behalf of the County against all liabilities, judgment, result of or in consequence of the granting of this permit.				
I hereby certify that I have authorization to make this application and the among other things, revocation of the application or permit. I further un year after the completion of the permitted project.				
Print Name		Signature	Date	
Notes:	I have	e received a copy of the Garrett County Roads Sp	ecifications	
1. Make all checks payable to GARRETT COUNTY				
2. It is the applicant's responsibility to obtain any additiona3. Contact the Roads Department 24 hours prior to start of		• •		
		Permit Fee:Bond Amount:		
Approved By Garrett County Roads:	Date	Paid by Check # Cash		

Date Received:_____Initialed:___

Approved By Garrett County Roads: _____ Date____