

PERMIT NO. _____



CITY OF VICTORIA
1670 Stieger Lake Ln, P.O. Box 36
Victoria, Minnesota 55386
Phone: 952/443-4210
Fax: 952/443-2110

**RIGHT-OF-WAY OR CITY EASEMENT
JOINT TRENCH UTILITY PERMIT APPLICATION**

Name and Address of Lead Utility (Permittee):	Name and Address of Party Performing Work:
_____	_____
_____	_____
_____	_____
Contact: _____	Contact: _____
Phone: _____	Phone: _____
24-Hour Emergency Phone: _____	24-Hour Emergency Phone: _____
Email address: _____	Email address: _____

1. Utility Type: (Check all that apply)	Company Name	Total Installation Length (Ft.) <i>(Column A)</i>	Joint Trench (Ft.) <i>(Column B)</i>	Additional Footage (Ft.) <i>(Column A-B)</i>
<input type="checkbox"/> Gas Main	_____	_____	_____	_____
<input type="checkbox"/> Gas Service	_____	_____	_____	_____
<input type="checkbox"/> Electric Main	_____	_____	_____	_____
<input type="checkbox"/> Electric Service	_____	_____	_____	_____
<input type="checkbox"/> Telephone Main	_____	_____	_____	_____
<input type="checkbox"/> Telephone Service	_____	_____	_____	_____
<input type="checkbox"/> Cable Main	_____	_____	_____	_____
<input type="checkbox"/> Cable Service	_____	_____	_____	_____
<input type="checkbox"/> Other	_____	_____	_____	_____
TOTALS:		_____	_____	_____
		Line (1)		Line (2)

2. **Attach Joint Trench installation detail** providing size and type of pipes, conduits and utilities.

Length of joint trench: _____ Dimensions of excavation: _____

Line (3)

Depth of pipe, conduit or cable: _____

3. Permit Fee footage Basis: (250ft. included in Permit Base Fee)

Joint Trench, _____(ft.) + Total Additional Footage, _____ft. - 250 ft. = _____(ft.)
Line (3) Line (2)

4. Type of Surface to be Disturbed: Gravel Bituminous Concrete Boulevard

5. Location (House No., Street, Nearest Intersection, Development Name):

(Attach 5 copies of scaled drawings showing accurate right-of-way information, topographic information, and planned installation.)

6. Work to start on or after _____ and to be completed on or before _____

7. Will detouring of traffic be necessary? Yes No If so, describe routing:

For _____
(Applicant)

Signed By _____

Dated _____

The date when the work is completed must be reported to the City of Victoria.