

Date Rec'd by County: _____

**APPLICATION FOR APPROVAL TO LOCATE
UTILITY LINE ON COUNTY RIGHT-OF-WAY
ROAD CUTS**

No. _____

TO: BOARD OF SHELBY COUNTY COMMISSIONERS

FIRM NAME: _____

Hereby requests permission to do a road cut at the following described location:

for the purpose of installing _____

_____ Installation will consist of:

A **road cut** _____ feet long in the road surface by _____ feet wide and _____ feet deep. Attached is a drawing showing location, size, height and controlling dimensions of the proposed installation relative to existing pavement, right-of-way, and any other utilities. Applicant is responsible for locating all utilities in work area. Anticipate road cut shall commence at the above location on or around _____.

Upon approval applicant will be responsible for contacting the proper authorities, including emergency personnel of conditions and work being done at the site. Applicant is also responsible for maintaining a safe traffic flow and providing their own barricades. All road cuts shall be made by saw and not by trencher or backhoe. The cut must be repaired with flowable backfill and either 4" of hot mix layed even with the surface of the road; or 8" of cold mix layed even with the surface of the road. If the road, street or thoroughfare to be cut is concrete, it shall be replaced with a minimum of 4,000 lb. strength. All expenses incurred are the responsibility of the contractor.

Applicant agrees to notify the Shelby Co. Highway Garage, (317-392-6485), twenty-four (24) hours prior to the actual time of beginning of the work upon the approval of the application.

Contractor: _____

Applicant: _____

Address: _____

Address: _____

Phone No: _____

Phone No: _____

Fax No: _____

Fax No: _____

Signature: _____

Approved by the Shelby Co. Board of Commissioners on the _____ day of _____, _____

Receipt No. _____

Receipt Amt. _____

Shelby Co. Commissioner

***The original and 2 copies of this request, along with 3 drawings must be received, (delivery by mail or in person, no faxes), in the Commissioners' Office, 25 W. Polk St., Room 206 Shelbyville, IN 46176 by noon on Thursday to be considered during the Commissioners' meeting the following Monday of each week.**

****Application Fee of Thirty-Five Dollars (\$35.00) due upon submission and is non-refundable.**