



Department of Public Works  
 6400 NW Beaver Dr  
 Johnston, Iowa 50131-0410  
 Phone (515) 278-0822 Fax (515) 727-8092

## APPLICATION AND PERMIT FOR RIGHT OF WAY WORK CITY OF JOHNSTON, IOWA

I, \_\_\_\_\_ of \_\_\_\_\_  
(company name) (company address)  
 doing work for \_\_\_\_\_

Hereby request a right of way work permit for the purpose of \_\_\_\_\_ Sewer \_\_\_\_\_ Gas  
 Construction or maintenance of (check one: service \_\_\_\_\_ Water \_\_\_\_\_ Tele.  
 Main line, other (specify) \_\_\_\_\_ Elec. \_\_\_\_\_ Other

Location, description and or dimensions of work to be performed: (please include any known survey monuments and location and dimensions of any easements that exist.)

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

For \_\_\_\_\_, owner of the property known as  
 \_\_\_\_\_  
(address) (subdivision or location)

In consideration for the granting of a right of way work permit by the City of Johnston, Iowa, the undersigned, his agents, heirs, successors or assigns agrees to indemnify and save harmless the said City of and from any and all losses, damages, claims, or other things whatsoever, arising out of or in connection with any acts, or negligence, defects, failure to repair, causes, omissions, claims, damages, suits, or actions hereinafter appearing, developed or brought by any person, firm or corporation or to any property of any person, firm or corporation against the said City by reason of, in connection with, or any way growing out of the grant hereunder; and the said undersigned, his agents, heirs, successors or assigns agree to hold the said City harmless and to indemnify it from any and all cost, attorney fees, expenses and liabilities incurred thereunder. Further permittee incorporates in this application all references to indemnification, liabilities and obligations under the Right of Way Work Ordinance No. 680.

The undersigned person hereby certifies to have the authority to execute this instrument and the said City relies upon such authority and the indemnifying agreement made herein in the grant set forth.

The undersigned further agrees to perform this work in strict compliance with the Utility Accommodation Policy and all rules, regulations and City ordinances relative to making excavations in Public places and the restoration of same. This permit shall be kept at the job site and exhibited to any official of the city making the request.

The undersigned is required to furnish and maintain all traffic control in accordance with the latest revision of the Manual on Uniform Traffic Control Devices, and obtain a street/lane closure permit.

Work to begin on the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_  
 Approximate completion date \_\_\_\_\_ Extension date \_\_\_\_\_

Public Works Department contacted \_\_\_\_\_  
 Comments \_\_\_\_\_

\_\_\_\_ Street Break  
 \_\_\_\_\_ Parking Cut  
 Signed \_\_\_\_\_  
 Phone number \_\_\_\_\_  
 24hr Emergency Contact # \_\_\_\_\_

**CALL PUBLIC WORKS DEPARTMENT BEFORE CLOSING OF STREET OR PARTS OF STREET AND BEFORE STREET OPENING OR BACKFILLING 278-0822**

**The Public Works Director has the ability to require any additional sketches, maps, etc.**

For office use only: Fee paid \_\_\_\_\_ Receipt # \_\_\_\_\_ Permit # \_\_\_\_\_  
 Bond on file \_\_\_\_\_ Deposit Paid \_\_\_\_\_ Approved by \_\_\_\_\_