CITY OF FRUITLAND

200 S. Whitley Drive
Po Box 324
Fruitland, ID 83619
Phone: 452-4421
Fax: 452-6146

www.fruitland.org
spearcy@fruitland.org

RIGHT-OF-WAY PERMIT APPLICATION

Date: _____

APPLICANT INFORMATION

Applicant Name: **Phone:**

Address:

CONTRACTOR INFORMATION

Contractor Name: **Phone:**

Contractor Address:

Company Name: **Phone:**

Company Address:

Name of Project Foreman: **Phone:**

Emergency Phone #:

PROJECT INFORMATION

Start Date: **Completion Date:**

Location of work:

Cross streets:

Description of work (attach sketch or plan) _____

_____

_____

_____

Please check all that are applicable:

- ☐ **Trench less than 150 ft**
- ☐ **Trench Work over 150 ft, _____LF**
- ☐ **Bore**
- ☐ **Bell Holes _____ ea**
- ☐ **Curb, gutter, and/or sidewalk over 25 LF, _____LF**
- ☐ **Street Surfacing, _____sq. yd.**
- ☐ **Overhead Work**
- ☐ **Gravity Irrigation system**
- ☐ **Sewer system**
- ☐ **Water system**
- ☐ **Pressure Irrigation**
- ☐ **Alley**
- ☐ **Private Conduit or Fiber Optic Line**

TRAFFIC CONTROL JUSTIFICATION

Please check all that are applicable:

☐ **Map of Street and Work Area Showing Traffic Restrictions** ☐ **Time Restrictions _____ to _____**

☐ **Multi-lanes** ☐**Yes** ☐**No** ☐ **Shoulder Work**

☐ **Two Lanes** ☐ **Work Behind Sidewalk and Curb and Pedestrian Restrictions**

Please check all that are applicable: ☐ **Road Closure** ☐ **Lane Closure** ☐ **Lane Restriction** ☐ **Flagging**

Traffic Plan: Date Submitted: _____ Approved By: _____ Submitted By: _____

Detour Plan: Date Submitted: _____ Approved By: _____ Submitted By: _____

Any incorrect data in the application or any violation of the permit will lead to immediate termination of the permit.