

INSTRUCTIONS FOR PERMIT TO PERFORM OPERATIONS ON A COUNTY ROAD

Please complete **all** the following items on the Permit application:

1. Name, Address, and Phone Number
2. Road Name, Milepost, Side of Road (left or right in direction of Milepost.), **Map No.** And **Tax Lot No.**
3. Complete information in the Operation Section, indicating what type of work will be performed.
4. Complete the Detailed Location Section, giving as much information as possible for each field. Any other information to be written in the miscellaneous area.
5. Be sure to sign and date application at the bottom left.
6. Include a check payable to Lincoln County in the amount of \$150.00
7. Proof of Insurance may be required for certain activities. Call for more information.

Print, and submit completed application to Lincoln County Public Works at 880 NE 7th St. in Newport. This permit may be submitted by fax, mail, or bring it to the Public Works Office. The fax number is (541) 574-1295.

The application will be assigned a Permit Number and a Road Department representative will inspect the proposed work site. After the permit has been approved, it will be returned to the office for processing and a copy of the approved permit will be sent to you.

If there is a requirement that needs to be met before the work can proceed, this will be indicated in the Requirements section of the permit.

Phone us at (541) 265-5747 if you have any questions concerning the permit. Thank you.

APPLICATION AND PERMIT TO
PERFORM OPERATIONS
 ON A COUNTY ROAD

Lincoln County Road Department
 880 NE 7th St. Newport, OR 97365-2513
 Phone: 541.265.5747

PERMIT NO.

Fee: \$150.00 (Public Utilities not subject to fee.)

EXPIRATION DATE

NAME

ROAD NAME

ADDRESS

ROAD NUMBER

MILEPOST

SIDE OF ROAD

PHONE

FAX

MAP NUMBER

TAX LOT

OPERATION

CHECK AND DESCRIBE YOUR USE:

POLE LINE

BURIED CABLE

PIPE LINE

MISCELLANEOUS

(OFFICE ONLY)

REQUIREMENTS

TIME PERIOD MONTH TO
 DAY TO
 HOUR TO

NOTICE NONE 24 HOUR 48 HOUR

INSTALLATION TRENCH PUSH BORE PLOW

INSURANCE TRAFFIC CONTROL BOND AMOUNT _____

DETAILED LOCATION OF FACILITY

MILE POINT TO MILE POINT		ENG STA TO ENG STA		SIDE OF HWY OR ANGLE OF CROSSING	DISTANCE FROM		BURIED CABLE OR PIPE		OPEN CUT	SPAN LENGTH
					C/L	R/W	DEPTH	SIZE AND KIND		

MISCELLANEOUS

COUNTY REQUIREMENTS

SPECIAL PROVISIONS

1. NOTHING CONTAINED IN THIS PERMIT CONSTITUTES A FINDING OF COMPLIANCE WITH ANY LAND USE, ENVIRONMENTAL LAW, OR OTHER REGULATIONS. BEFORE COMMENCING ANY WORK UNDER THIS PERMIT, THE APPLICANT SHOULD OBTAIN ALL NECESSARY LAND USE AND ENVIRONMENTAL PERMITS, IF ANY, FROM ALL APPROPRIATE GOVERNMENTAL REGULATORY ENTITIES WITH JURISDICTION OVER THE AREA OF WORK.

This application, when approved by the department, is subject to the terms of LCC 6.305 through 6.360 (may be obtained upon request) and any special provisions. The applicant agrees and approves these terms and provisions.

SIGNATURE

DATE

FOREMAN

DATE

TITLE

DATE

ROAD MAINTENANCE SUP.

DATE

SENT BY

DATE

PUBLIC WORKS DIRECTOR

DATE