

CLINTON COUNTY RIGHT-OF-WAY PERMIT

ROAD NAME _____ DATE _____

_____ Miles/Feet N S E W
 of _____ Road. Township _____

Proposed Starting Date _____ Days required to complete work _____

If Buried Utility:

Depth of utility (30" minimum) _____ Distance from edge of pavement (5' minimum) _____

If Aerial Utility:

Height above roadway (18' minimum) _____ Distance from edge of pavement _____

Application is hereby made by _____

Detailed description of work to be performed _____

NOTE: Submit this application, accompanied by detailed plans and profile (specifically showing the location of the work, distances to roadway, lengths and location of nearest intersection). Please submit separate applications for each county or township road affected:

Clinton County Engineer	Phone (937) 382-2078
Gary Smith – Utility Permits	Fax (937) 382-5318
1326 Fife Avenue	E-mail: gsmith@clintoncountyengineer.org
Wilmington, OH 45177	



IF THIS PERMIT IS GRANTED, I/WE AGREE TO THE FOLLOWING CONDITIONS:

1. That, I/we will notify residence involved, prior to construction, as to the nature of work, and restoration of their frontage shall be equal to the original state.
2. The permit holder shall notify the County Engineer 48 hours in advance of the day on which the work will begin and the anticipated time of completion.
3. That traffic will be maintained at all times, unless permission is granted by the County Engineer to close the road.
4. If the roadway pavement is damaged either by construction, construction equipment or by excessive weight, I/we will make complete restoration as advised by the County Engineer.
5. That lights, signs, barricades, and if necessary, flagmen and watchmen will be placed on the project for the protection of traffic at all times, day and night. Guidelines as detailed in the Ohio Manual of Uniform Traffic Control Devices (OMUTCD) for handling of traffic must be fully complied with.
6. That all trenches will be compacted, graded and seeded within 30 days of start of construction. Restoration may require additional methods other than standard seeding in streambeds, slopes and high erosion areas. Methods such as rip rap, netting, and/or straw bales may be required. Repair any broken or damaged tile.

7. That, I/we will not hold county responsible for damage to any utility placed in roadway right-of-way due to regular repair and maintenance of roadway.
8. That, I/we assume the responsibility for and will save the County harmless from any and all claims for personal injuries and/or property damages, and shall defend any action that might be brought due to the applicant's work activities on this project. Must meet County requirements for minimum liability insurance.
9. No open cutting of any township or county road will be permitted unless the County Engineer's Office has given written permission, and advises the utility of our restoration standards.
10. That, I/we will notify the County Engineer's Utility Permits Supervisor upon completion of said project for final inspection and release.
11. That responsibility under this permit will remain in force until a release has been granted by the County Engineer.
12. All buried utilities in road right of way will need to be marked with a sign or flexible delineator with utilities name, address and phone number stating buried utility in area. Signs will need to be placed every 1000' min. and at bridges and culverts greater than 4' clear span. Signs are to be placed at fence or right of way lines.
13. All buried utilities shall be buried a minimum of 6' deep under all culverts, bridges and streams. Utility shall not go over any culvert.

UTILITY COMPANY _____
 ADDRESS _____ CITY _____ STATE _____ ZIP _____
 PHONE NO. (w/ area code) _____ / _____ / _____ FAX NO. (w/ area code) _____ / _____ / _____
 AUTHORIZATION SIGNATURE (*Required*) _____ TITLE _____

- | | |
|----------------|-------------------------------|
| A) W/O # _____ | D) Utility Co. Permit # _____ |
| B) Code _____ | E) Engineer _____ |
| C) Job # _____ | F) Drawing # _____ |

(To be completed by the County Engineer's Office)

Permit work under conditions stated is hereby _____ **Granted** _____ **Denied**

By _____

County Representative/Date

Township Trustee/Date

This permit will expire on _____

Township Trustee/Date

Township Trustee/Date

Final Inspection has been performed by the County Engineer's Office.

By _____ County Log Mileage _____

County Representative/Date

The applicant is hereby released of requirements set forth by this permit.

By _____

County Engineer/Date