



**PERMIT APPLICATION FOR CONSTRUCTION
IN COUNTY RIGHT-OF-WAY**

(Revision 02-2023)

Supervisor Dist.: _____

Reviewed By: _____

MCDOT TC NO.: _____ Submitted By: _____

Issue Date: _____

Expiration Date: _____

The undersigned herewith makes application for a permit to enter upon and use a portion of the right-of-way of the Public

Project Title: _____

Major Crossroads / Address: _____

in the _____, Of Section _____, Township _____, Range _____

for the purpose of: _____

Applicant Name (PRINT): _____

Applicant Signature: _____

Address: _____

Phone: _____

Contractor: _____

City, State, Zip Code: _____

Contact Person: _____

Phone: _____

Contact Email: _____

Fax: _____

Owner: _____

Please answer the following related to this project:

Enter Total Sheets for Review by MCDOT: _____

[] Is this a MCDOT project? If so, please provide name and/or number.

Is there an IGA for this project? If so, please provide a copy.

If applicable, please provide the utility company job number:

[] Is this a cell or wireless project?

[] Is this project subject to a license or franchise agreement?

[] Is this related to a subdivision? If so, please provide subdivision name:

Professional Registrant Seal for Cost Estimate (if applicable)

ENTER PERMIT ITEMS:	Unit Cost	Unit	Quant.	Amount
WATER -->				
SEWER -->				
PVMT -->				
MISC. -->				
OTHER -->				
----- Below section for use by MCDOT permitting staff only -----				
SUBTOTAL PERMIT ITEMS (above)				
PLAN REVIEW FEE @ \$100/sht				
PROCESSING FEE				
PERMIT FEE (3% of Permit Items)				
TOTAL FEE (Permit Fee + Review + Processing)				

INSURANCE (Expiration Date): _____

BOND REQUIRED, Y N _____

Comments: _____

*Attach additional sheet if necessary for more permit items.

*For questions regarding this permit application contact a MCDOT right-of-way permit coordinator at (602) 506-7848, (602) 506-8791 or (602) 506-6216.