APPLICATION AND PERMIT FOR RIGHT-OF-WAY WORK
City of West Des Moines, Iowa

I, _____ of _____ hereby request an
<div align="center">(Company Name)</div>

excavation permit for the purpose of construction ☐Sidewalk/Approach $20 ☐Sewer* $20

or maintenance for _____, ☐Water* $20

owner of property known as

_____ or _____
<div align="center">(Address)   (Subdivision or Location)</div>

*For sewer and water a Plumbing Permit from the Building Department may also be required. $200 deposit required for **ALL** ROW work – Once restored to previous conditions call 515-222-3475 to schedule an inspection. 24 HOUR NOTICE REQUIRED FOR SCHEDULING

In consideration for the granting of an excavation permit by the City of West Des Moines, 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 expenses or other things whatsoever, arising out of or in connection with any acts or negligence, defects, failure to repair, causes, omissions, claims, damages, suites, 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 Street Excavation Ordinance.

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 – **FOR STREET/LANE CLOSURES 48 HOUR NOTICE REQUIRED TO PUBLIC SERVICES CALL 515-222-3480**

Work to begin on the _____ day of _____, 20____

Approximate completion date _____ Construction department contacted _____

Comments _____

<div align="center">Signed_____</div>

<div align="center">Phone Number_____</div>

CALL ENGINEERING DEPT. BEFORE OPENING OR BACKFILLING : 515-222-3475

Admin use only:

Fee Paid$_____   Receipt #_____   Permit #_____

<div align="right">webforms\ROW Permit.pdf</div>