



CITY OF WINOOSKI PUBLIC WORKS PERMIT APPLICATION

PROPERTY OWNER _____ **DATE** _____

PRINT APPLIANT NAME (if other than property owner) _____

PROPERTY ADDRESS _____ **PHONE** _____

TYPE OF PROPERTY

- RESIDENTIAL
- COMMERCIAL

TYPE OF PERMIT

- | | | | |
|---|-------|-----------------|-------|
| <input type="checkbox"/> STREET EXCAVATION (\$15.05/sf) | _____ | TOTAL \$ | _____ |
| <input type="checkbox"/> GREENBELT EXCAVATION (\$2.38/sf) | _____ | TOTAL \$ | _____ |
| <input type="checkbox"/> PAVING (\$12.00) | _____ | TOTAL \$ | _____ |
| <input type="checkbox"/> CURB CUT (\$4.00 linear ft. removed) | _____ | TOTAL \$ | _____ |
| <input type="checkbox"/> OTHER | _____ | TOTAL \$ | _____ |

GRAND TOTAL \$ _____

APPROXIMATE VALUE OF WORK \$ _____ **ANTICIPATED DATE OF WORK** _____

CONTRACTOR _____ **PHONE** _____

CONTRACTOR ADDRESS _____ **CONTACT PERSON** _____

ONSITE CONTACT: _____

DESCRIPTION OF REQUEST:

SEE REVERSE SIDE FOR TERMS, CONDITIONS, AND AGREEMENT



GENERAL CONDITIONS AND REQUIREMENTS

In consideration of the granting of this permit, the undersigned agrees:

1. **To accept and abide by all provisions of the most recent City of Winooski Ordinances, standards, and specifications for construction, Champlain Water District standards and specifications for construction, and all other pertinent ordinances or regulation that may be adopted in the future.**
2. **The City of Winooski is not a member of Digsafe. For Digsafe Certification, please contact the Water Resources Manager (jchoate@winooski.vt.org).**
3. **Except as herein authorized no work shall be done or obstacle placed within the limits of the Right of Way in a manner as to interfere unnecessarily with the traveling public.**
4. **All the work herein contemplated shall be done to the satisfaction of the City of Winooski.**
5. **To notify the Department of Public Works when the work is ready for inspection. Inspections will occur Monday – Friday between the hours of 7am and 2pm, except on City Holidays. Please call 802 655 6410 x 28 to schedule.**

*** NOTE: ALL PERMITS MUST HAVE FINAL INSPECTION *
FAILURE TO CONTACT THE CITY FOR INSPECTION PRIOR TO BACKFILL MAY REQUIRE THE PERMITEE TO UNCOVER OR OTHERWISE EXPOSE WORK SO THAT INSPECTION CAN OCCUR**

I hereby acknowledge that if the City of Winooski finds that work is done within the City Limits that extends into the streets, beyond the curb cut, and is an obstruction as defined in The City of Winooski Ordinances, then the City shall have the authority to fix, remove, or abate this obstruction, the costs of said abatement to be charged to the contractor applying for this permit.

SIGNATURE _____ **DATE** _____

Applications must be submitted to:
Winooski City Hall
27 W. Allen St. Winooski, Vermont 05404
802 655 6410

FOR CITY USE ONLY

APPROVED BY _____ **DATE** _____

REJECTED BY _____ **DATE** _____

REASON _____



ATTACH DRAWINGS OF PROPOSED WORK TO THIS APPLICATION OR COMPLETE IN THE BOX BELOW

ADDITIONAL CONDITIONS IF ANY
