

**TOWN OF GRAND LAKE
ENCROACHMENT PERMIT**

(THIS PERMIT MUST BE OBTAINED AT LEAST SEVEN (7) WORKING DAYS PRIOR TO THE PLANNED COMMENCEMENT OF CONSTRUCTION)

APPLICATION DATE: _____ FEE PAID: \$ _____

NAME OF EXCAVATOR: _____

ADDRESS: _____

TELEPHONE: _____

LOCATION OF WORK TO BE DONE: _____

NAME OF PROPERTY OWNER: _____

ANTICIPATED START DATE: _____ COMPLETION DATE: _____

BRIEFLY DESCRIBE WORK TO BE DONE: _____

HAS WATER TAP FEE BEEN PAID? YES____ NO____ N/A____

HAVE WATER AND SEWER LOCATES BEEN DONE/SCHEDULED? YES____ NO____ DATE:_____

UTILITY LOCATE IDENTIFICATION NUMBER: _____

BONDING/INSURANCE INFORMATION (MUST PROVIDE BOTH BOND AND INSURANCE):

1. IF ONE TIME, PRINT BONDING COMPANY, POLICY NUMBER AND EXPIRATION DATE:

2. IF ANNUAL, PRINT THE DATE THAT THE \$10,000 BOND WAS POSTED WITH TOWN OF GRAND LAKE:

3. HAVE YOU SUBMITTED A COPY OF YOUR GENERAL LIABILITY INSURANCE IN THE AMOUNT OF \$500,000 NAMING THE TOWN OF GRAND LAKE AS CO-INSURED? YES____ NO____

PLEASE READ THE FOLLOWING BEFORE SIGNING THIS PERMIT:

1. THERE WILL BE NO ROAD CUTS FROM OCTOBER 16TH THROUGH MAY 1ST OF EACH YEAR. THERE WILL BE NO PERMITS ISSUED AFTER OCTOBER 8TH AND ALL WORK MUST BE COMPLETED BY THE 15TH OF OCTOBER.
2. THERE WILL BE NO DIGGING ON SATURDAYS AND SUNDAYS, UNLESS SUCH ENCROACHMENT IS DEEMED AN EMERGENCY BY TOWN OF GRAND LAKE PERSONNEL.
3. NO OPEN DITCHES WILL BE ALLOWED OVER THE WEEK-END AND/OR HOLIDAYS (MEMORIAL DAY, INDEPENDENCE DAY, LABOR DAY).
4. ALL CONSTRUCTION SITES MUST BE MONITORED AND POSTED IN ACCORDANCE WITH PART VI OF THE MANUAL ON UNIFORM TRAFFIC CONTROL DEVICES (MUTCD), CURRENT REVISION.
5. ALL GRAVEL AND ASPHALT ROAD CUTS MUST BE BACK-FILLED AND COMPACTED IN 2 FEET LIFTS.
6. ALL GRAVEL ROAD CUTS MUST BE FINISHED WITH THE TOP 12 INCHES CONSISTING OF CLASS C TYPE MATERIAL AND COMPACTED TO 90%. ALL EXCESS SPOILS MUST BE COMPLETELY REMOVED AND HAULED AWAY, AND CLASS C ROAD BASE PUT OVER THE ENTIRE CUT AND 15 FEET ON EACH SIDE OF THE CUT TO A DEPTH OF 3 TO 4 INCHES.
7. ALL ASPHALT ROAD CUTS MUST BE FINISHED WITH 18 INCHES OF THE FOLLOWING: 12 INCHES OF CLASS C TYPE MATERIAL (COMPACTED TO 90%) AND THE TOP 6 INCHES MUST BE 1/2" MINUS HOT MIX - NOT COLD MIX - AND MUST BE LEVEL WITH THE EXISTING ASPHALT MAT. ALL ASPHALT CUTS MUST BE DONE WITH SOME TYPE OF ASPHALT CUTTER (I.E. JACK HAMMER ASPHALT CUTTER, ETC.) ALL ASPHALT CUTS MUST HAVE STRAIGHT (NOT JAGGED) EDGES. ALL EXCESS SPOILS MUST BE COMPLETELY REMOVED AND HAULED AWAY.

By applying for this permit, I hereby understand and agree that I am responsible for repairing the Town of Grand Lake's rights-of-way as described above according to the Town's specifications. I further understand and agree that my failure to comply to the Town's specifications and other requirements of the code of ordinances may be sufficient cause to forfeit the collateral posted with the Town. Lastly, I agree to perform the work according to the plans, specifications and work schedule submitted, and agree that all modifications must be approved by the Town.

APPLICANT: _____ DATE: _____

APPROVED BY:

For the Town of Grand Lake Date: _____

Bond Approved for Release on: _____