



CITY OF SHOW LOW PUBLIC WORKS
(928) 532-4100

For Office Use Only

Date received: _____

Time received: _____ AM/PM

Received by: _____

**PERMIT FOR WORK WITHIN RIGHT – OF – WAY
OR CONNECTION TO PUBLIC UTILITIES**
(10 BUSINESS DAYS ARE REQUIRED TO PROCESS THIS FORM)

NAME OF APPLICANT: _____ APPLICANT PHONE: _____

APPLICANT EMAIL: _____ ALTERNATE PHONE: _____

MAILING ADDRESS: _____ CITY, STATE, ZIP: _____

CONTRACTOR NAME: _____ LICENSE #: _____

LOCATION OF WORK (ADDRESS): _____ LOT #: _____

BRIEF DESCRIPTION OF WORK: _____

START DATE (ESTIMATED): _____ COMPLETION DATE (ESTIMATED): _____

AGREEMENT

It is understood and agreed that all work shall conform to applicable City, State and Federal regulations and to all conditions set forth on this permit.

Applicant Signature

Date

FOR CITY STAFF USE ONLY

NEW RESIDENTIAL: YES NO

MANUFACTURED HOME: YES NO

OUTSIDE CITY LIMITS: YES NO

SERVICES NEEDED

- SERVICE LINE INVESTIGATION
- PAVEMENT⁽¹⁾⁽²⁾
- CULVERT⁽¹⁾
- DRIVEWAY⁽¹⁾
- MAILBOX⁽¹⁾
- LANDSCAPING⁽¹⁾⁽²⁾⁽⁴⁾
- WATER MAIN TAP⁽³⁾
- WATER METER
- SEWER MAIN TAP⁽³⁾
- SEWER SERVICE NO TAP
- LOW PRESSURE SEWER
- LINE EXTENSION⁽³⁾
- WORKING IN EASEMENT (NOT ROW)
- COMMERCIAL CONSTRUCTION
- ESTIMATE⁽³⁾

- (1) **A plan and written description of the work is required.**
- (2) **Private Retaining Structures and Fences are PROHIBITED in the City Right-Of-Way.**
- (3) **Sewer and Waterline Taps and/or Extensions will incur additional costs which will be determined on a case by case basis. The City will provide a cost estimate for this work. Only City Personnel may make water or sewer main connections.**
- (4) **Landscape plans to be reviewed by Planning and Zoning.**

NOTES: _____

INTERNAL TRACKING

BUILDING PERMIT # (IF APPLICABLE): _____ A.P.N. _____ DUE DATE: _____

DATE SENT TO PW: _____ BY: _____ DATE REC'D @ PW: _____ BY: _____

SERVICE LINE AVAILABLE AT PROPERTY LINE ? SEWER: YES NO WATER: YES NO

SERVICE INVESTIGATION DONE BY: _____ DATE: _____

APPROVED BY: _____ DATE: _____

FINAL INSPECTION (IF APPLICABLE): _____ DATE: _____

FINAL APPROVAL: _____ DATE: _____