

## **EXCAVATION PERMIT REQUEST**

City of South Bend – Division of Engineering 227 W Jefferson Boulevard, Ste 1316 South Bend, IN 46601

APPLICANT INFORMATION		
Name of Contractor/Company:		
Phone: Email Address:		
PROJECT INFORMATION		
Date of Work (mm/dd/yyyy):/20 to/20		
Time of Work:to		
Location of Work Address:		
Type of Work: □ Cable □ Electric □ Fiber □ Gas □ Manhole repair □ Sanitary Sewer □ Water □ Other		
Type of Cut: Number of Cuts   Boring   Trenching		
Cut Location: ☐ In Street ☐ Tree lawn/sidewalk right-of-way		
Description of Work:		
Excavation in right-of-way <u>WITHOUT</u> a permit will result in a stop work order and/or delays in permitting. Emergency excavations must be called into the Permits Office at 574.235.9254 no later than noon the following day.		
This excavation permit request is non-transferrable. A signature subjects the named contractor/permittee to all applicable rules, duties and obligations imposed by the City of South Bend Municipal Code and to all regulations imposed by the City of South Bend's Board of Public Works.		
Signature of Applicant: Date:		
Completed application should be dropped off to the City's Engineering Office or emailed to <a href="mailto:rowpermitsoffice@southbendin.gov">rowpermitsoffice@southbendin.gov</a> . For questions, contact the Permits Manager at 574.235.9254.		
OFFICE USE ONLY: Date Received: Fee Paid: Approval Date:		

## **EXCAVATION PERMIT REQUEST (continued)**

LIST ALL OTHER CONTRACTORS	
First Subcontractor	
Name of Subcontractor/Company:	
Name of Contact:	
Phone:	Email Address:
Second Subcontractor	
Name of Subcontractor/Company:	
Name of Contact:	
Phone:	Email Address:
Third Contractor	
Name of Subcontractor/Company:	
Name of Contact:	
Phone:	Email Address: