

Expiration Date: ___/ ___/

City of Canal Winchester

36 South High Street
Canal Winchester, Ohio 43110
Development Department
Phone (614) 837-7501 Fax (614) 837-0145

Signature

RIGHT OF WAY USE PERMIT

<u>APPLICANT</u>						
Company Name:			Phone:_	Phone:		
Contac	ct Name:		Email:			
Addres	ss	City:		State:	Zip:	
Permis	ssion is hereby granted to:		to occupy a	a public street, a	lley, sidewalk, Right	
of Way	y or easement located at (a detailed drawi	ng may be required):	:			
for the	e purpose of:					
with th 1. 2. 3. 4. 5. 6.	Winchester. All attachments, exhibits and conditions attached the applicant hereby enters into an agreemed accordance with the current standards and smaintain the area free from debris, dirt and Any pavement, utility, landscape or appurte City and repaired to the City's satisfaction and The City reserves the right to require field act An indemnity agreement may be required with the applicant will hold the City of Canal Winders as a result of accidents, injuries or damages way as authorized by this section, and to full event the City is required to pay such losses. Action taken pursuant to this permit shall be required by the Codified Ordinances of the City is required to pay such losses.	eched to this permit are ent to maintain such street to maintain such street to maintain such street the Citylitter. nance damaged within and no cost to the City. djustments of the proport the Special Right of chester and its officials suffered within the publy indemnify the City of the deemed acceptance of City of Canal Winchester	e hereby made a preet, alley, sideway, to provide adecthe Right of Way osed improvemer Way Permit appliand employees holic right of way of Canal Wincheste of its terms and corr, Part 11, Title 7, application is c	part of this agreenable, right of way, of quate protective so shall be immediated that the time of incation. Such agreem less of all liabile as a result of the result, its officials and anditions including Chapter 1197, Right.	nent. r easement in afe guards and to sely reported to the stallation. sement provides that lity which might arise use of the right-of- employees, in the all requirements ght of Way Use.	
Applicant's or Authorize Agent's Signature			Date			
	DO	NOT WRITE BELOW TH	HIS LINE			
		Fee: \$ Paid	Application	No		
	Date of Action://		Approved:	Yes		