



CITY OF GENEVA
PUBLIC WORKS DEPARTMENT
1800 SOUTH STREET
GENEVA, IL 60134
630/232.1501
630/208.1503 fax

For Office Use Only:	
Approved By:	_____
Date:	_____
Days for completion:	30 60 90 ____

APPLICATION FOR ROW PERMIT

Please review the "ROW Permit Requirements" document prior to submitting this application. All required documentation should be submitted at time of application.

PROJECT ADDRESS	_____
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PROPERTY OWNER	<input type="checkbox"/> Check here if applicant is property owner
Name _____	
Address _____	
Email _____	Phone _____

CONTRACTOR	
Name _____	
Address _____	
Email _____	Phone _____

DESCRIPTION OF WORK	_____
Please note: Work that involves excavation in the ROW require detailed plans to be attached.	

I HEREBY CERTIFY THAT I AM THE OWNER OF RECORD OR THAT THE PROPOSED WORK IS AUTHORIZED BY THE OWNER OF RECORD; THAT I HAVE BEEN AUTHORIZED BY THE OWNER TO MAKE THIS APPLICATION AND TO SCHEDULE ALL NECESSARY INSPECTIONS AS AN AGENT, AND THAT I AGREE TO CONFORM TO ALL APPLICABLE CODES, LAWS, AND ORDINANCES OF THE CITY OF GENEVA. IT IS FURTHER UNDERSTOOD THAT ALL CONSTRUCTION PERFORMED UNDER THIS ROW PERMIT SHALL BE IN ACCORDANCE WITH THE CURRENT VERSION OF THE "STANDARD SPECIFICATIONS FOR ROAD AND BRIDGE CONSTRUCTION" AS ADOPTED BY THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND ALL TRAFFIC CONTROL OPERATIONS SHALL BE IN ACCORDANCE WITH THE CURRENT "ILLINOIS MANUAL ON UNIFORM TRAFFIC CONTROL DEVICES".

Signature _____ Date _____

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Documentation Requirements:	Required (Y or N)	Received	On File
Detailed plan	_____	_____	_____
Certificate of Insurance	_____	_____	_____
Warranty/Maintenance Bond	\$10,000 _____ \$20,000 _____	_____	_____
\$100 Permit Fee	_____	_____	_____
Engineering Pre-Installation Inspection	_____	_____	_____
Plumbing Connection Inspection	_____	_____	_____
Approved City Utility Franchise Agreement	_____	_____	_____