

CITY OF DUNEDIN PINELLAS COUNTY, FLORIDA RIGHT-OF-WAY PERMIT

FOR OFFICE USE ONLY
PERMIT NO.
NO. OF LOCATIONS
ANNUAL GENERAL NO.
DATE RECEIVED

Article X of Chapter 78 of the Dunedin City Code Policy Directive dated July 27, 2018

INSTRUCTIONS: This form, as well as all supporting documents, shall be submitted to eng-rowpermits@dunedinfl.net							
The CITY OF DUNEDIN,	a Florida municipal corpora	ation of the State	of Florida, he	ereinafter ca	lled the City, h	ereby grants to	
(Name of Utility)	(Business Address)	(City) (State)	(Zip Code)	(Contact N	Io.) (Business I	Email Address)	
nereinafter called the Utility, a	Permit to construct, install,	maintain, repair	, expand, rem	ove or locat	e for the scope	of work described as	
as shown in the attached do	ocumentation in, under, over	r, on or across ar	y rights-of-w	ay in the cit	y at the followi	ng location:	
	-						
	C. 4. D				1 1''		
	South, Range					ns:	
Estimated Project Cost:	Latitude: Estimated Comp	-1-4: D-4	_ Longitude: _				
1 Toject Start Bate.	Estimated Comp	netion Bute					
Commencement of Constructions after line location. If connecessary permit, unless the expeditiously, and the City stoway shall not exceed ten (10)	nstruction of an approved utility provides good causo aff shall revoke any perm	plan is not come in writing for its issued to the	menced with the delay, it i utility. Once	in three (3) is presumed commence	months of the that the utilit	e issuance of the cy failed to proceed	
utility's behalf, if the utility	elephone number and busing is not directly applying for information and filing this appeals.	or the permit (at	ach additiona	al pages as i	ecessary). Und	ler penalty of perjury,	
(Authorized Agent N	ame) (Business Address)	(City)	(State) (Zip (Code) (Co	ontact No.) (Bu	siness Email Address)	
Name, business address, tel perform work under this pe	lephone number and busines ermit.	ss email address	of employees	s, contractor	s and any/all ot	her agents retained to	
(Employee/Contracto	or/Agent Name) (Business A	Address) (City)	(State) (Zip (Code) (Co	ontact No.) (Bu	siness Email Address)	
(Employee/Contracto	or/Agent Name) (Business A	Address) (City)	(State) (Zip C	Code) (Co	ontact No.) (Bu	siness Email Address)	
(Employee/Contracto	or/Agent Name) (Business A	ddress) (City) (State) (Zip Co	ode) (Co	ontact No.) (Bus	siness Email Address)	

Documentation required with this application submittal applicable to Article X of Chapter 78 of the Dunedin City Code to include but, not limited to:

Detailed drawings, sketches, site plan, survey, design standard specifications (including photos) of proposed site and work.

Historical Designation (must provide supporting documentation)

MOT Plan.

All applicable Certificates of Insurance pursuant to § 78-550

Bar chart/schedule containing a detailed description of each phase of proposed work.

Proposed greenery trimming/removal plan.

Proposed camouflage plan and Environmental Compatibility Plan.

Repair, Performance and/or Maintenance Guarantee pursuant to § 78-519 (a).

Regulatory Agency Authorizations/Permits.

Collocation plan: If yes, provide any/all applicable agreements. If no, applicants shall demonstrate compliance with Sec. 78-523 with respect to collocation by providing a cost comparison, signed and sealed by a FL Registered Engineer, justifying their proposed installations.

Operating under City Franchise Agreement: If, yes provide documentation.

Operating under City Annual General Permit: If, yes provide documentation.

Communications Registration

Application fee: If exempt, provide proof of payment of the communication service tax pursuant to Florida Statutes.

Land Use and Zoning

- 1. Any/all plans submitted shall not unreasonably or unnecessarily conflict with, create access difficulty, or otherwise adversely affect the city's use and construction of any of its utilities.
- 2. All underground crossing installations shall be installed at a minimum depth of 36 inches below pavement.
- 3. The Utility shall furnish the City with a survey showing the exact locations of all facilities to be installed pursuant to this permit, said survey to be sufficiently detailed to allow location of said installation by reference thereto. Attached sketches, site plan or other detail sheets covering details of this installation, shall be a part of this permit. All survey and corner monuments subject to displacement shall first be referenced and later reset by a Florida Registered Land Surveyor.
- 4. Failure to fully and accurately complete this application form, and to provide all of the supplemental information and documentation required in support of this application, will result in the City's determination that the application is incomplete, requiring the Utility to either satisfy the deficiencies identified or have the application denied.
- 5. Construction shall not begin prior to Utility's procurement of all necessary permits and authorizations which are required in the conduct of its business, including, but not limited to, any utility joint use attachment agreements, conduit use agreements, microwave carrier licenses, and any other permits, licenses and authorizations to be granted by duly constituted regulatory agencies having jurisdiction over the operation of the Utility.
- 6. By signing this document, the applicant verifies that it is a utility, as defined by the City's code, authorized by the City's code and Florida law to construct, maintain, renew/remove, and operate facilities in the public's right-of-way and that no changes to this form have been made. Applicant further verifies that it has reviewed and is compliant with all requirements set forth in Article X of Chapter 78 of the Dunedin City Code and the Dunedin Public Works Department's Utility Accommodations Guide.

THE UTILITY NOTIFICATION CENTER "SUNSHINE",			
(811) MUST BE NOTIFIED 48 HOURS IN ADVANCE OF	On behalf of the Utility Applicant (Print Name)		
OF CONSTRUCTION			
	Signature	Date	

TO BE COMPLETED BY THE CITY OF DUNEDIN ENGINEERING DIVISION Circle all that apply: Road Closure form completed Yes No N/A Sod Required N/A Yes No Open Cut/Pavement to be Restored Yes N/A (must provide reason for open cut) No Jack and Bore Yes No N/A Arborist Approval Yes No N/A **Directional Bore** Yes No N/A LPA & Commission Action Required Yes No N/A As-Builts Required Yes No N/A COI and Applicable instruments to Risk Mgmt./HR Yes No N/A Traffic Approved Yes No N/A Utilities Approved Yes No N/A Design Standards Approved Yes No N/A Zoning Approved Yes No N/A Historical Designation Yes No N/A (must provide supporting documentation) All other Yes No N/A Special conditions and instructions Recommended for approval by: ___ Engineering Division/Print Name Recommended for approval by: ___ Engineering Division/Signature Date Approved by:_ Assistant Director of Utilities/City Engineer Date