

CITY OF OWATONNA
ENGINEERING DEPARTMENT

Phone: (507) 444-4350

540 West Hills Circle
Owatonna, MN 55060

Email: PublicWorks@ci.owatonna.mn.us

APPLICATION TO CONSTRUCT SIDEWALK, DRIVEWAY OR CURB CUT

NAME OF APPLICANT: _____

ADDRESS: _____ CITY: _____ STATE: _____ ZIP CODE: _____

CONTACT PERSON: _____ PHONE NO.: _____

CONTACT EMAIL: _____

PROPERTY ADDRESS: _____

PROPERTY OWNER: _____

PERMIT REQUESTED: _____

(Select one from dropdown)

NATURE OF WORK _____

(Select one from dropdown)

LENGTH: _____ DESCRIPTION: _____

- **Contractor shall furnish the City with a Certificate of Public Liability Insurance before construction commences in an amount of at least \$1,000,000 combined single limit or equivalent naming the City as "additional insured"**

○ INSURANCE RECEIVED:

- Contractor must schedule inspections 48 hours in advance by calling 507-444-4350
- All Sidewalk, curb, gutter and driveway replacement work shall be completed by Sept. 15 and all turf establishment shall be completed by October 15th.
- **No Curb Cuts, Driveway or Sidewalk Permits issued between November 15 – March 1 without permission from the City Engineer**

I, We, the undersigned, herewith accept the terms and conditions of the City of Owatonna and agree to fully comply therewith to the satisfaction of the City Engineer.

DATE: _____ **APPLICANT SIGNATURE:** _____

FEES:

Sidewalk Permit \$20.00: _____ Curb Cut or Driveway Permit \$50.00: _____

Total: _____ Cash Check Receipt Number: _____

DATE: _____ **APPROVED BY:** _____ **PERMIT NO.:** _____

City Engineer

INSPECTION:

INSPECTING ENGINEER: _____ DATE: _____

NOTES: _____