

# City of Reidsville

230 West Morehead Street, Reidsville, North Carolina 27320, Phone (336) 349-1066, Fax (336) 347-2355



DEPARTMENT OF  
COMMUNITY DEVELOPMENT

## APPLICATION FOR INSTALLATION OR REPAIR OF UNDERGROUND UTILITIES WITHIN PUBLIC STREET RIGHT-OF-WAY

**TO:** City of Reidsville  
Dept of Community Development  
230 W Morehead St.  
Reidsville, NC 27320  
336-349-1065

**RETURN TO:** \_\_\_\_\_  
Attn: \_\_\_\_\_  
Street \_\_\_\_\_  
City, State Zip \_\_\_\_\_  
Phone \_\_\_\_\_

Permit / \_\_\_\_\_  
Work Order \_\_\_\_\_

This application is made for approval of installation/repair of underground utilities within the public street right-of-way on

\_\_\_\_\_ between \_\_\_\_\_ and \_\_\_\_\_  
(Street) (Street) (Street)

for the purpose of \_\_\_\_\_

It is agreed that said work shall be performed in compliance with City standards as adopted by the City of Reidsville, May 12, 1993.

**FOR INSPECTION PURPOSES AND FOR THIS PERMIT TO BE VALID:**

- 1) THIS OFFICE MUST BE NOTIFIED NO LESS THAN 24 HOURS BEFORE WORK IS TO BE STARTED, AND
- 2) THIS OFFICE MUST BE NOTIFIED NO MORE THAN 24 HOURS AFTER WORK IS COMPLETED

The construction described on this permit must be completed within 1 year of the approval date. After 1 year, a new permit must be submitted and approved.

A drawing of the proposed work is to be shown on reverse side or attached. Construction drawings should have minimum scale of 1" = 100'

Applicant shall fully indemnify and save harmless, the City of Reidsville, its employees, and agents from all claims and actions whatsoever that may arise from work associated with this application.

Date: \_\_\_\_\_ Applicant/Owner Name (Print & Sign): \_\_\_\_\_

No Bond Required:  Bond Amount: \$ \_\_\_\_\_

Date Bond Posted: \_\_\_\_\_ Date Bond Returned: \_\_\_\_\_

Bond Used for Restoration/Repair - \_\_\_\_\_

<u>FEE SCHEDULE</u>	
1 - 2	days to complete \$20.00
3 - 5	days to complete \$50.00
6 - 10	days to complete \$100.00
11 - 30	days to complete \$200.00
30+	days to complete \$10.00/day

Estimated Days to Complete: \_\_\_\_\_

Fee Amount: \$ \_\_\_\_\_

Date Fee Paid: \_\_\_\_\_ Received by: \_\_\_\_\_

APPROVED BY: \_\_\_\_\_  
(Asst City Manager for Community Development or City Engineer) DATE

DATE CONTACTED PRIOR TO WORK: \_\_\_\_\_

DATE CONTACTED AFTER WORK COMPLETED: \_\_\_\_\_

DATE ACCEPTED: \_\_\_\_\_