



Permit No. _____

City of Athol

Right of Way Encroachment Permit Application

Date: _____ Job Address: _____

Assessor's parcel number closest to site: _____

Applicant: _____

Address: _____

Phone #: _____ Email: _____

Contractor Name: _____ Reg. # _____

Address: _____

Phone #: _____ Email: _____

Date work is scheduled to commence: _____ Completion date: _____

Purpose for work: _____

Approx. area to be disturbed: _____

Will the work require cutting of the pavement? Yes No

Will the work require boring under the road? Yes No

Will the work result in new/additional utilities or structures within the right-of-way? No

If yes, describe location and extent: _____

Attach a drawing (drawn to appropriate scale) identifying property lines, location and extent of site disturbing activity, location of existing utilities (if known), location of pavement edge, location of all existing and planned structures, and location of driveways which may be impacted.

Code Enforcement: Has this site been issued a Stop Work Order or Notice of Violation?

Yes No

Application Fee: _____ Date Paid: _____ Receipt No.: _____



Permit No. _____

Important Notices

- CALL BEFORE YOU DIG! Call 811 to have underground utilities located at least 2 working days prior to any excavation work. It's required by State law and it could save your life.
- The right of way, street or alley shall be restored to a condition as good or better than the condition prior to excavation or cutting of the surface by the person causing the excavation. All work shall be done in a good and workmanlike manner within 90 days of the date the surface was disturbed.
- This permit shall be considered null and void if the work authorized by such permit is not conducted within the timeframes approved by this permit.

_____ Date: _____
Applicant's Signature (attach owner's authorization if applicant is not property owner)

City use only below this line

Application Accepted as complete: _____ Date: _____
 City Clerk

Reviewed and Approved by: _____ Date: _____
 City Planner

Reviewed and Approved by: _____ Date: _____
 Public Works

Comments/Conditions/Restrictions: _____

