



## APPLICATION AND PERMIT TO OCCUPY OR PERFORM OPERATIONS UPON A STATE HIGHWAY

See Oregon Administrative Rule, Chapter 734, Division 55

PERMIT NUMBER

|         |      |
|---------|------|
| CLASS : | KEY# |
|---------|------|

| GENERAL LOCATION              |  |  |  | PURPOSE OF APPLICATION<br>(TO CONSTRUCT/OPERATE/MAINTAIN)                              |                                 |                      |  |
|-------------------------------|--|--|--|--|---------------------------------|----------------------|--|
| HIGHWAY NAME AND ROUTE NUMBER |  |  |  | <input type="checkbox"/> POLE LINE   | TYPE                            | MIN. VERT. CLEARANCE |  |
| HIGHWAY NUMBER                | COUNTY   |  |  | <input type="checkbox"/> BURIED CABLE  | TYPE                            |                      |  |
| BETWEEN OR NEAR LANDMARKS     |  |  |  | <input type="checkbox"/> PIPE LINE   | TYPE                            |                      |  |
| HWY. REFERENCE MAP            | DESIGNATED FREEWAY<br><input type="checkbox"/> YES <input type="checkbox"/> NO | IN U.S. FOREST<br><input type="checkbox"/> YES <input type="checkbox"/> NO |  | <input type="checkbox"/> NON-COMMERCIAL SIGN   | FEE AMOUNT                      |                      |  |
| APPLICANT NAME AND ADDRESS    |  |  |  | <input type="checkbox"/> MISCELLANEOUS OPERATIONS AND/OR FACILITIES AS DESCRIBED BELOW |                                 |                      |  |
|                               |  |  |  | BOND REQUIRED<br><input type="checkbox"/> YES <input type="checkbox"/> NO              | REFERENCE:<br>OAR 734-55-035(2) | AMOUNT OF BOND       |  |
|                               |  |  |  | INSURANCE REQUIRED<br><input type="checkbox"/> YES <input type="checkbox"/> NO         | REFERENCE:<br>OAR 734-55-035(1) | SPECIFIED COMP. DATE |  |

### DETAIL LOCATION OF FACILITY(For more space attach additional sheets)

| MILE POINT | TO | MILE POINT | ENGINEERS STATION | ENGINEERS TO STATION | SIDE OF HWY OR ANGLE OF CROSSING | DISTANCE FROM  |          | BURIED CABLE OR PIPE |               | SPAN LENGTH |
|------------|----|------------|-------------------|----------------------|----------------------------------|----------------|----------|----------------------|---------------|-------------|
|            |    |            |                   |                      |                                  | CENTER OF PVMT | R/W LINE | DEPTH/VERT.          | SIZE AND KIND |             |
|            |    |            |                   |                      |                                  |                |          |                      |               |             |

DESCRIPTION AND LOCATION OF NON-COMMERCIAL SIGNS OR MISCELLANEOUS OPERATIONS FACILITIES

### SPECIAL PROVISIONS (FOR MORE SPACE ATTACH ADDITIONAL SHEETS)

TRAFFIC CONTROL REQUIRED

- OPEN CUTTING OF PAVED OR SURFACED AREAS ALLOWED?

◆  YES [OAR 734-55-025(6)]       NO      ◆  YES [OAR 734-55-100(2)]       NO [OAR 734-55-100(1)]

◆ **AT LEAST 48 HOURS BEFORE BEGINNING WORK, THE APPLICANT OR HIS CONTRACTOR SHALL NOTIFY THE DISTRICT REPRESENTATIVE AT TELEPHONE NUMBER:** \_\_\_\_\_

**OR FAX A COPY OF THIS PAGE TO THE DISTRICT OFFICE AT:** \_\_\_\_\_ **SPECIFY TIME AND DATE IN THE SPACE BELOW.**

◆ A COPY OF THIS PERMIT AND ALL ATTACHMENTS SHALL BE AVAILABLE AT THE WORK AREA DURING CONSTRUCTION.

◆ **ATTENTION: Oregon law requires you to follow rules adopted by the Oregon Utility Notification Center. Those rules are set forth in OAR 952-001-0010 through OAR 952-001-0090. You may obtain copies of the rules by calling the center at (503) 232-1987.**

COMMENTS - ODOT USE ONLY

IF THE PROPOSED APPLICATION WILL AFFECT THE LOCAL GOVERNMENT, THE APPLICANT SHALL ACQUIRE THE LOCAL GOVERNMENT OFFICIAL'S SIGNATURE BEFORE ACQUIRING THE DISTRICT MANAGER'S SIGNATURE.

|  |                  |       |                                    |
|--|------------------|-------|------------------------------------|
| LOCAL GOVERNMENT OFFICIAL SIGNATURE  |                  | TITLE | DATE                               |
| <b>X</b>   |                  |       |                                    |
| APPLICANT SIGNATURE  | APPLICATION DATE | TITLE | TELEPHONE NO.                      |
| <b>X</b>   |                  |       |                                    |
| When this application is approved by the Department, the applicant is subject to, accepts and approves the terms and provisions contained and attached: and the terms of Oregon Administrative Rules, Chapter 734, Division 55, which is by this reference made a part of this permit. |                  |       | DISTRICT MANAGER OR REPRESENTATIVE |
| <b>X</b>   |                  |       | APPROVAL DATE                      |