



Department of Public Works
320 East Mosby Road
Harrisonburg, VA 22801
540-434-5928

Applicant Information:

Applicant Name: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Contact Name (if different): _____

Email Address: _____

Phone Number: _____ Fax Number: _____

Approved Engineering Comprehensive Site Plan ____ Yes (Complete Section Below) ____ No (Skip)

Development Name: _____

City Tax Map Number: _____

City Approval Date: _____

Contractor Information (if applicable):

Contractor Full Name: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Contact Name (if different): _____

City Business License Number: _____

VA DPOR Number: _____

Contractor Email Address: _____

Phone Number: _____ Fax Number: _____



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Permit Request Information:

- Underground Utility Parallel Crossing (Overhead/Underground)
- Aboveground Structures Excavation (Test Bores) Turn Lane Construction
- Curb and Gutter Installation Sidewalk Construction Landscaping Tree Trimming
- Storm Sewer Construction Dumpster (Temporary in ROW) How many days? _____
- Small Cell Wireless Facility Street / Sidewalk Closure: How many days? _____
- On Street Parking Closure: How many days? _____ How many spaces? _____ Other
- Commercial Entrance Residential Entrance

For Residential and Commercial Entrances Only:

Describe and/or attach an illustration of how you plan to use the property and what do you plan to add to the property (buildings, parking areas, etc).

Will the planned work disturb more than 10,000 square feet of land or require utility extensions/relocations? Yes No

Do you plan to subdivide or do any property line adjustments? Yes No

Location Information:

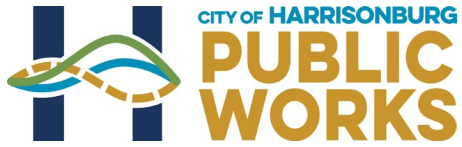
Street Address (closest available): _____

Between Street Name: _____ and Street Name: _____

Applicant Job Number: _____

Brief Description of Work:

Planned Start Date: _____ Planned Completion Date: _____



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Surety (Indicate the type of surety that will be or has already been provided)

Utility Franchise Approved Engineered Comprehensive Site Plan

Performance / Cash Surety (complete below to determine amount)

Estimated Cost of Work* in the Right of Way: \$ _____

Amount of Performance Surety / Cash Surety: \$ _____

* Includes all equipment, material, and labor to accomplish work.

Signature of Applicant: _____ Date: _____

Signature of Contractor (if applicable): _____ Date: _____