



Department of Construction Services  
 36 South High Street  
 Canal Winchester, Ohio 43110  
 Phone (614) 834-5109 Fax (614) 829-7734

**RIGHT OF WAY SIDEWALK/DRIVE PERMIT**

**APPLICANT**

Company Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Contact Name: \_\_\_\_\_ Email: \_\_\_\_\_

Address \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Permission is hereby granted to: \_\_\_\_\_ to occupy a public street, alley, sidewalk, Right of Way or easement located at: \_\_\_\_\_ for the purpose of: \_\_\_\_\_ with the following conditions:

1. Replacement of existing sidewalks/approaches shall be in accordance with the City of Canal Winchester Codified Ordinance, Part Nine, Chapter 905 – Sidewalks & Driveways.
2. The applicant hereby enters into an agreement to restore such street, alley, sidewalk, right of way, or easement in accordance with the current standards and specifications of the City, to provide adequate protective safe guards for the excavations and to maintain a working area free from debris, dirt and litter.
3. The applicant shall provide the City with any such fee as may be required by the Codified Ordinances of the City of Canal Winchester.
4. All attachments, exhibits and conditions attached to this permit are hereby made a part of this agreement.
5. The contractor shall notify the Construction Services Administrator, 834-5109, at least 24 hours in advance of needed inspections.
6. The contractor shall make the required notifications to OUPS prior to any excavation work.
7. Any sewer, waterline or appurtenance damaged shall be immediately reported to the City and repaired to the City's satisfaction and no cost to the City.
8. The City reserves the right to require adjustments of the alignment of the improvement at the time of installation.
9. If the work is not completed within the timeframe defined by this permit an application for extension shall be submitted to the City within 3 days of the original expiration date.

\_\_\_\_\_  
**Applicant's or Authorize Agent's Signature**

\_\_\_\_\_  
**Date**

*DO NOT WRITE BELOW THIS LINE*

Date Received: \_\_\_ / \_\_\_ / \_\_\_\_\_

Fee: \$ \_\_\_\_\_  
 Paid

Application \_\_\_\_\_ No

Date of Action: \_\_\_ / \_\_\_ / \_\_\_\_\_

Approved: \_\_\_\_\_ Yes

Expiration Date: \_\_\_ / \_\_\_ / \_\_\_\_\_

\_\_\_\_\_  
 Signature