



TOWN OF SUPERIOR
 199 N LOBB AVE, SUPERIOR, AZ 85173/520-689-5752
 Email: publicworksreviews@superioraz.gov

Permit : _____
Date: _____

RIGHT-OF-WAY ENCHROACHMENT PERMIT

SECTION # _____ 1/4 SECT. _____ DRAWING/JOB # _____ DATE: _____

PROJECT NAME _____

PROJECT ADDRESS _____

DEVELOPER/OWNER/AGENT _____ TELEPHONE # _____

DESCRIPTION OF IMPROVEMENTS _____ FAX # _____

Plans Attached

WORK PERFORMED

- | | |
|---|---|
| <input type="checkbox"/> Within Dedicated Right-of-Way | <input type="checkbox"/> BY CONTRACTOR |
| <input type="checkbox"/> Within Federally Patented Easement | <input type="checkbox"/> BY UTILITY COMPANY |
| <input type="checkbox"/> Within Roadway Easement | <input type="checkbox"/> BY GOVERNMENTAL AGENCY |
| <input type="checkbox"/> EMERGENCY REPAIR | <input type="checkbox"/> BY OWNER OF RESIDENCE |

CONTRACTOR _____
 Address _____
 Town _____

CONTACT _____
 Phone: Day _____
 Emergency _____
 FAX _____

License #'s: Town Business _____

State Contractor's _____

Certificate of Insurance provided through _____

SUBCONTRACTOR _____
 Address _____
 Town _____

CONTACT _____
 Phone: Day _____
 Emergency _____
 FAX _____

License #'s: Town Business _____

State Contractor's _____

Certificate of Insurance provided through _____

SPECIAL PROVISIONS _____

- Slurry under pavement per Detail AJ-200M, Type S. Compact to M.A.G. Specifications. Barricade & Flagman per Town requirements.**

Call 520-689-5752 to schedule Pre-Construction Meeting

TOTAL PERMIT FEE \$ _____

Pre-Con Meeting _____

Inspection _____

Work Start _____

Closeout _____

See Reverse Side for Permittee and Public Works Department Signatures

**STREET ENCROACHMENT PERMIT
GENERAL CONDITIONS**

1. All work performed under this permit shall be in accordance with current M.A.G. Uniform Standard Specifications and Details for Public Works Construction, modifications as adopted by the Town, approved construction plans, special provisions, and other applicable Town, County, State, or Federal regulations.
2. In the event any improvements hereby permitted interfere with the Town's ability to maintain, reconstruct, improve, or relocate any street, road, drainage or utility appurtenances, the owner shall at **their** expense, remove, relocate, raise or lower such items within 60 days after proper notification by the Town.
3. Permittee agrees to indemnify the Town, its employees and agents against all damages which may arise out of work to be performed hereunder.
4. Violation of any provision of this permit may result in a Stop Work Order or the contractor not being issued future permits.
5. In the event that work done under authority of this permit creates any hazard or source of danger to the public, permittee shall provide and maintain sufficient barriers, signals, detours or other measures while such hazard exists. Road closures, detours, signs, barricades, use of flagmen, etc. shall all be in accordance with State and Town adopted manuals and receive approval from the Public Works Director.
6. Public Works Department shall be notified 24 hours in advance of any construction activity covered by this permit. Work which has not received proper inspection can be subject to removal or rework.
7. Prior to final inspection and acceptance of the work, copies of applicable material test results shall be furnished. Any deviations from the approved plans shall be noted on as-built drawings.
8. If upon final inspection, any item fails to meet Town approval, permittee shall immediately proceed to correct such defect as directed by the Town.
9. All materials and workmanship shall be guaranteed for a period of 12 months after final acceptance. Notice of warranty repairs will be sent in writing from the Public Works Department to the owner. Repairs should be corrected promptly.

I understand the conditions of this permit and agree that work must be done in conformity with applicable laws, plans and specifications. I warranty the construction to be free of defects in materials and workmanship for a period of one year following date of final acceptance.

Signature of Permittee: _____

Date: _____

Printed Name: _____

Permit Approved By: _____

Date: _____

Reviewed and Approved: _____

Permit shall expire on _____, 20____



TOWN OF SUPERIOR
 199 N LOBB AVE, SUPERIOR, AZ 85117/320-689-5752
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Permit :
Date:

PERMIT FEE CALCULATION

Fees per Ord # XXX

<u>Description</u>	<u>Unit Cost</u>	<u>Unit</u>	<u>Quantity</u>	<u>Total</u>
Permit Application Fee	\$100.00	EA	_____	
Plan Review Fee	\$135.0	EA	_____	
Driveway	\$0.10	SF	_____	
Sidewalk, Curb & Gutter	\$0.20	SF	_____	
Sidewalk Ramp	\$25.00	EA	_____	
Valley Gutter	\$0.30	SF	_____	
Catch basin	\$35.00	EA	_____	
Headwall	\$35.00	EA	_____	
Manhole	\$40.00	EA	_____	
Scupper	\$25.00	EA	_____	
Street Light	\$50.00	EA	_____	
Utility Pole	\$35.00	EA	_____	
Street Sign	\$15.00	EA	_____	
Fire Line with backflow	\$40.00	EA	_____	
Conduit, Pipeline, Culvert, Cable < 4"	\$0.40	LF	_____	
Conduit, Pipeline, Culvert, Cable > 4"	\$1.00	LF	_____	
Trenching and Boring	\$0.30	LF	_____	
Boring only	\$0.20	LF	_____	
Landscaping	\$0.05	SF	_____	
Fire Hydrant	\$15.00	EA	_____	
Tap / Sleeve / Valve / Meter	\$3.00	EA	_____	
Dirt/concrete channel	\$0.10	LF	_____	
Special Concrete Structure	\$40.00	EA	_____	
Other special work items (TBD)	_____	LS	_____	
Survey Monument	\$10.00	EA	_____	
Utility Adjustment	\$10.00	EA	_____	
Manhole adjustment	\$50.00	EA	_____	
<u>Inspections</u>				
Weekdays (1 hr min.)	\$50.00	HR	_____	Pavement and No Pavement Cut/Concrete Work
Weekends (4 hr min)	\$90.00	HR	_____	Pavement and No Pavement Cut/Concrete Work
Holidays (4 hr min.)	\$120.00	HR	_____	Pavement and No Pavement Cut/Concrete Work

<u>Description</u>	<u>Unit Cost</u>	<u>Unit</u>	<u>Quantity</u>	<u>Total</u>
Pavement Replacement	\$0.35	SY	_____	
Mill and overlay	\$0.25	SY	_____	
Overlay Top Course	\$0.15	SY	_____	

<u>Asphalt Cuts on Streets 1yrs-10yrs</u>			
5 sq. yds. or less	\$1.30	SY	_____
5 sq. yds. to 100 sq. yds.	\$2.50	SY	_____
Larger than 100 sq. yds.	\$5.00/ SY	SY	_____
<u>Asphalt Cuts on Streets 10 + yrs</u>			
Any size area	\$1.50	SY	_____

Grand Total Permit Fees _____



TOWN OF SUPERIOR

199 N Lobb Ave, Superior, AZ 85173
520-689-5752

(Incomplete applications will not be accepted)

PROPERTY OWNER AUTHORIZATION FORM

I (property owner) _____

hereby authorize (owner's agent) _____

To make application to Town of Superior for the following (description of work)

Assessor Parcel Number: _____

Physical Address: _____

City/Town: _____ State: AZ Zip: _____

By signing this Form, I acknowledge and agree that I am not released from responsibility for: (1) the payment of any and all fees associated with the issuance of any permits, orders, notices or other approvals ("Approvals") by Town of Superior pursuant to my agent's application; (2) the satisfactory completion of all work authorized by such Approvals in compliance with all applicable county, state and federal laws, codes, rules, regulations and requirements; and (3) correcting any violations of the terms and conditions of such Approvals issued by Town of Superior pursuant to my agent's application.

Property Owner: _____

Phone Number: _____

By (signature): _____

Email: _____

Name: _____

Date: _____