

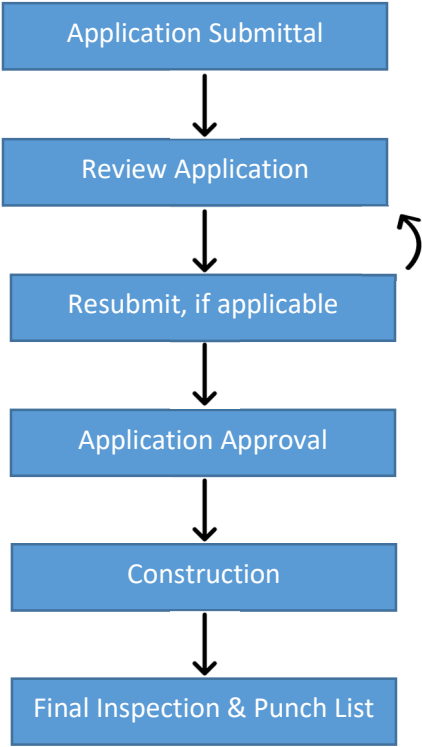
City of Portsmouth

Right-of-Way Permit Application



General Information & Instructions for

- Public Utility Provider Right-of-Way Permit



*City of Portsmouth | Engineering Department
728 2nd Street, Room 25 | Portsmouth, OH 45662
Phone: 740-354-7557 | Fax: 740-354-5383*



General Instructions Utility Provider Permit

City of Portsmouth, Engineering Department

728 2nd Street, Room 25, Portsmouth, OH 45662

Phone: 740-354-7557 Fax: 740-354-5383

Public Utility Provider Permit

This permit is used for public utility providers to construct new utilities or maintain existing utilities within the public right-of-way. Work cannot begin until the permit application has been approved and the permit fees have been paid.

General Instructions

1. A permit application must be submitted to the Engineering Department accompanied with a set of construction drawings and a maintenance of traffic plan. Construction drawings shall be in 11"x17" pdf and submitted as an attachment via email or 11"x17" hard paper copy.
2. All contractors and sub-contractors MUST have current contractor registration with the Engineering Department.
3. Contractor or Project Manager shall notify the following groups at least three (3) working days before any kind of road closure and upon termination of road closure.
 - Police Department
 - Fire Department
 - Public Service Department
 - Local Schools
 - Local Hospitals
4. All traffic control devices and locations shall comply with the Ohio Manual of Uniform Traffic Control Devices (OMUTCD).
5. Contractor or Project Manager shall notify the Ohio Utility Protection Services (OUPS) at least 48 hours before any construction work begins.
 - OUPS 1-800-362-2764 or 8-1-1
6. All pavement restoration shall be same as existing pavement and as good or in better condition than prior to construction.
7. Roadway buildup shall be as follows:
 - Asphalt pavement – Granular backfill, 8" 4000 psi medium set concrete, 2" Type 448 asphalt concrete surface course. Seal all edges of pavement with minimum three inches (3") of asphalt binder meeting the requirements of 702.01 of ODOT CMS.
 - Concrete pavement – Granular backfill, 8" or match bottom of existing concrete pavement, whichever provides greater thickness, 4000 psi medium set concrete. 5/8" x 18" dowel bars shall be installed 30" max O.C. per ODOT SCD BP-2.1.
 - Brick pavers – Granular backfill, 8" 4000 psi medium set concrete, 1" sand cushion or other approved material, reset removed brick pavers.
8. All restored concrete driveways, sidewalks, curbs, and curb ramps shall comply with current Ohio Department of Transportation's standard construction drawings.
9. Contractor or Project Manager shall contact the Engineering Department upon substantial completion of the work to compose a punch list of items to finish the project. Restoration work must be approved by the City Engineer prior to the contractor de-mobilizing work site.



Utility Provider Right-of-Way Permit

City of Portsmouth, Engineering Department
728 2nd Street, Room 25, Portsmouth, OH 45662
Phone: 740-354-7557 Fax: 740-354-5383

UTILITY PROVIDER

and

CONTRACTOR (if applicable)

Name: _____

Name: _____

Address: _____

Address: _____

City, State, Zip: _____

City, State, Zip: _____

Phone: _____

Phone: _____

Email: _____

Email: _____

PRIMARY CONTACT INFORMATION

Utility Provider

Contractor

Project Manager: _____

Foreman: _____

Phone: _____

Phone: _____

Email: _____

Email: _____

PROJECT INFORMATION

Project Type: (check all that apply)

Overhead Utility Underground Utility Other: _____

Description of Project: _____

Method of Installation: Open Cut Road Bore Aerial Cable Other: _____

Will roadway be closed to traffic? Partial Road Closure (one lane) Full Road Closure No closure

If full closure, list detour route: (use additional sheets if needed) _____

Maintenance of Traffic: (check all that apply for partial or full road closure)

Flaggers Barricades Flat Sheet Signs Illuminating Signs Other: _____

** If performing shoulder work only, at minimum use "Work Ahead" signs and cones or barrels to delineate location of work.*

(Please provide a set of construction plans including maintenance of traffic plan with this application)

Estimated Value of Work within Public ROW: _____

Estimated Dates of Construction: Project Begin: _____ Project End: _____

CONTRACTOR & SUB-CONTRACTOR INFORMATION

All contractors and sub-contractors must have current registration with the City of Portsmouth before a permit can be issued.

General Contractor Information

Contractor Name: _____ License #: _____

Contractor Address: _____

City, State, Zip: _____

Phone: _____ Fax: _____

Primary Contact Information

Contact Name: _____ Title: _____

Office Phone: _____ Fax: _____

Mobile Phone: _____

Email: _____

Sub-Contractor Information (provide list of all sub-contractors)

Contractor Name	License #	Type of Work