



ENGINEERING DEPARTMENT • PHONE: 651-792-7004 • EMAIL: engineering@cityofroseville.com
2660 CIVIC CENTER DR. • ROSEVILLE, MN 55113

RIGHT-OF-WAY PERMIT
EXCAVATION or NON-EXCAVATION (OBSTRUCTION)

CITY PERMIT NUMBER: _____

Permits can also be applied for online using [ePermits](#).

APPLICATION DATE:		UTILITY PROJECT NUMBER:	
APPLICANT			
Name: _____			
Address: _____		City/State/Zip: _____	
Contact Person: _____		Work/Cell Phone: _____	
Email: _____			
PROJECT INFORMATION			
SITE:	Street: _____		
Location (To and From): _____			
RIGHT-OF-WAY DETAILS:	<input type="checkbox"/> Roadway	<input type="checkbox"/> Sidewalk/Pathway	<input type="checkbox"/> Boulevard
Right of Way Jurisdiction: <input type="checkbox"/> City <input type="checkbox"/> County / State (If checked, a Ramsey County or MnDOT ROW permit is also required.)			
Are you going to complete restoration in compliance with Roseville's Right-of-Way Ordinance Templates? <input type="checkbox"/> Yes <input type="checkbox"/> No			
TYPE OF FACILITY:		PROPOSED WORK:	
<input type="checkbox"/> Cable TV: Size/Material/Type: _____	<input type="checkbox"/> Telecommunications Fiber	Hole (Quantity): _____	
<input type="checkbox"/> Electric: Size/Material/Type: _____	<input type="checkbox"/> Gas	Trench (Linear Ft): _____	
<input type="checkbox"/> City Water: Size/Material/Type: _____	<input type="checkbox"/> Curb Cut	Bore (Linear Ft): _____	
<input type="checkbox"/> City San. Sewer: Size/Material/Type: _____	<input type="checkbox"/> Small Cell	Aerial (Linear Ft): _____	
<input type="checkbox"/> City Storm Sewer: Size/Material/Type: _____	<input type="checkbox"/> Other	Utility Pole (Quantity): _____	
	Description: _____	Roll-Off/POD Container (Quantity): _____	
SCHEDULE:	Estimated Start Date/Time: _____	Estimated End Date/Time: _____	
Acknowledgement and Signature:			
The undersigned hereby makes application to the City of Roseville to perform the work as herein described. The work for which this permit is issued shall be performed according to: (1) the conditions of this permit; (2) the approved plans and specifications; and (3) the applicable City approvals, Ordinances and Codes.			
Print Name: _____		Signature: _____	
<input type="checkbox"/> Contractor <input type="checkbox"/> Owner			
WARNING: It is the contractor's responsibility to call for utility locates before digging. Gopher State One call: 651-454-0002			
OFFICE USE ONLY			
SEPARATE PERMITS REQUIRED: <input type="checkbox"/> Ramsey County <input type="checkbox"/> Mn/DOT			
FEES:	\$ _____	Obstruction Fee	\$ _____
Hole	\$ _____	Curb Cut	\$ _____
Trench	\$ _____	Other: _____	\$ _____
Borings	\$ _____		
Permit Approved By & Date: _____			Total Fees: \$ _____

Please call Dana Stevens, Right-of-Way Coordinator, at 651-792-7047 with project related questions.