



Town of Pagosa Springs
 551 Hot Springs Boulevard · Post Office Box 1859 · Pagosa Springs, CO 81147
 Phone: 970.264.4151 · Fax: 970.264.463

Road Cut Permit Application

DATE: _____ RC ____ - ____

PROJECT DESCRIPTION: _____

APPLICANT/CONTRACTOR INFORMATION

Name: _____

Property address: _____

Mailing address: _____

City: _____ State _____ Zip: _____

Cellular: _____ Home: _____ Business: _____

Email: _____

PROPERTY OWNER/UTILITY INFORMATION

Name of Property Owner: _____

Mailing address: _____

City: _____ State: _____ Zip: _____

Cellular: _____ Home: _____ Business: _____

Email: _____

Utility company owning service main line: _____

ROAD CUT INFORMATION

Location- (Street Address): _____

Length of Cut: _____ Width of Cut _____

Type of Surface (Check one): **Asphalt** _____ **Gravel** _____

Person of Firm performing work: _____ *CWP# _____

Dates of work to be performed (from) _____ (to) _____

Road Closures anticipated: YES _____ NO _____

ROAD BORE INFORMATION

Location-(Street Address): _____

Length of Bore: _____ Width of Cut _____

Person or Firm performing work: _____ *CWP# _____

Dates work to be performed (from) _____ (to) _____

PERMIT FEE AND BOND INFORMATION

- **ASPHALT ROAD CUT= \$50.00 + \$1000.00 BOND**
- **GRAVEL ROAD and R.O.W CUT= \$50.00 + \$500.00 BOND**
(R.O.W. includes work in public right of way, area between property line to roadway/sidewalk)
- **ROAD BORE= \$25.00 + \$500.00 BOND**

METHOD and AMOUNT OF FEE PAYMENT- CASH/CHECK/CREDIT CARD \$ _____ DATE PAID _____

Transaction/Check # _____

Amount of Bond Required \$ _____ Date Received _____

- Other than a cash bond, attach the certificate of performance bond insurance to the application.
- The certificate must state the Town of Pagosa Springs as the Beneficiary.
- Utility Bond coverage on file: YES _____ NO _____

SITE PLAN INFORMATION

Site plan attached (required)*

Site plan shall include the following information:

- Site Orientation. (North Arrow)
- Legal Description and property address
- Lot lines and property size
- Proposed Road Cut/Bore including Lengths

Initial

REQUIREMENTS

- ____ NOTIFICATION OF STREETS SUPERVISOR: **BRAD LATTIN** AT THE TOWN SHOP **970-585-4012**
- ____ ALL ASPHALT CUTS MUST BE COMPLETELY BACKFILLED WITH FLOWABLE FILL TO THE BOTTOM OF THE ASPHALT SURFACE, PRIOR TO START OF PROJECT, PROVIDE THE STREETS SUPERVISOR WITH A COPY OF DELIVERY TICKET
- ____ ALL CUTS MUST BE BACKFILLED IMMEDIATELY AFTER COMPLETION OF UTILITY WORK
- ____ ALL CUTS MUST BE MAINTAINED AND ASPHALT PATCHED COMPLETED IN A TIMELY MANNER. UNCOMPLETED AND UNMAINTAINED CUTS WILL BE REPAIRED BY THE TOWN AND ALL OR PORTIONS OF THE BOND WILL BE FORFEITED.
- ____ ALL ROADS AND RIGHT OF WAYS MUST BE RETURNED TO THE ORIGINAL CONDITION, ALL DEBIRS MUST BE REMOVED FROM THE SITE. DISTURBED SOILS REPLACED IN A MANNER THAT ALLOWS FOR ADEQUATE DRAINAGE AND IS AESTHETICALLY ACCEPTABLE.

OFFICE USE ONLY

INSPECTION INFORMATION

Verification of saw cut surface	Yes__ No__	
Verification of flowable-fil:	Yes__ No__	
Verification of compactions:	Yes__ No__	
Verification of hot asphalt surface:	Yes__ No__	
Safety requirements observed:	Yes__ No__	
Work approved 1 year after last repair:	Yes__ No__	
Bond Released:	Yes__ No__	Date _____ Approved by: _____
Town M.C. attached	_____	

