

CITY OF SPARKS – PUBLIC WORKS DEPARTMENT

ENCROACHMENT / EXCAVATION PERMIT APPLICATION

1675 E. Prater Way, Suite 107

Sparks, NV 89434

(Phone) 775-353-2306

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To All Applicants:

Section 12.12 of the Sparks Municipal Code requires any person performing work within The City of Sparks right-of-way must first obtain an encroachment and/or excavation permit. **All permit applications received will be ready for issuance within 72 hours after approval.** Timely processing of any permit is predicated upon the completeness of the information required on the application.

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Date of Application: _____ Time: _____

Date Work to Start: _____

Contractor: _____ Contractor's Rep: _____

Address: _____ Phone #: _____ Fax # _____

_____ Contractor's License No. _____

Work to be done for: _____ Phone #: _____

Address: _____

LOCATION OF WORK (exact address and/or street being worked on and distance from nearest cross street.

Include streets on both sides of cut) _____

DESCRIPTION OF WORK – (include whether work involves excavation or simply occupying the right of way)

Lineal feet of curb and gutter being removed? _____

Lineal feet of sidewalk being removed? _____

Dimensions of asphalt being removed? _____ Asphalt Depth? _____

Longitudinal Cut? _____ Transverse Cut? _____ Arterial/Collector? _____

Is work in a travel lane? _____

Is work within 400' of a signalized intersection? _____ Traffic Loops affected? _____

Are there any manholes, valves, vaults, or survey monuments that will need to be readjusted after patching? _____

If so, how many of each? _____

Are there any pavement markings that will need to be redone? _____ If so, how many linear feet of each? _____

Does the work involve installing, removing, or repairing a sanitary sewer lateral? _____

Will the work be completed within fourteen (14) calendar days from start date? _____ If not, how many? _____

Contractor _____

Location of Work _____

TRAFFIC CONTROL

Are any traffic lanes being closed: _____ If so, how many? _____ How long? _____

Encroachment permit applications for full lane closures on arterial or collector streets shall be submitted 48 hours prior to said lanes being closed.

Provide a detailed sketch of the work area, identifying street names and/or addresses as well as cross streets. **(MANDATORY)**. Traffic control shall conform to current M.U.T.C.D. Standards.

DOLLAR VALUE OF WORK BEING PERFORMED IN R/W \$ _____

AUTHORIZED SIGNATURE (Applicant) - _____

PRINTED NAME - _____

(for official use only) Permit No. _____

Encroachment Base Fee \$ _____

Excavation Base Fee \$ _____

Permanent Patch Fee (includes asphalt patch, overlays,
cold milling, manholes, valves, vaults, loops,
monuments, pavement markings, etc. \$ _____

Penalty Fees \$ _____

Total Estimated Fee \$ _____ Calculated By: _____

Admin Section

Is the contractor bonded? _____ Is the contractor's liability insurance current? _____ Expiration date _____

Inspector Section

Is the patch in a penalty area? _____ If so, what's the age of the street? _____ What is the penalty %? _____

Notes:

Inspectors Signature: _____ Date & Time: _____