

Revised: 07/01/13, lcr

## **DEPARTMENT OF PUBLIC WORKS**

3200 Civic Center Circle NE –Suite 200 • Rio Rancho, New Mexico 87144 (505)891-5016

## CIP REQUEST FOR RIGHT-OF-WAY USE PERMIT

(In accordance with City Ordinance Chapter 96 – Use of Public Right-of-Way)

(To be completed/submitted by the Contractor performing the work)

No handwritten submissions will be accepted.

Date of Application	
Requested Work Start Date	
***Requested Start Date Must Be At Least	5 business Days after Submission of Complete Application***
Planned Work Completion Date	
Applicant (Contractor) Name	
Applicant Address	
Contact Person Responsible for Work	Cell#
Emergency Contact Number (24 hour):	
E-Mail Address:	
Name of City Contact Project Manager/Engine	eer:
Project Name:	Project Number:
Address of Work:	
Description of Work:	
Length of Work Zone:	Width of Work Zone:
New Mexico One-Call #	
Traffic Control Firm:	Contact Name/Number:
Emergency Contact Number (24 hour):	
Is Road Closure Required? (Yes/No) Is Detou	ur Required? (Yes/No) Is Bond/Insurance on File? (Yes/No)
The ROW Permit will not be reviewed/acce	epted if a Traffic Control Plan (TCP) from a certified traffic
control technician is not concurrently subm	nitted.
I certify that this application is accurate and complete:	
Signature of Applicant	Dotos
Signature of Applicant  PWCIPTrafficPermits	Date: