

**CITY OF HUDSON PERMIT APPLICATION TO WORK IN PUBLIC
RIGHT-OF-WAY, STREET AND / OR ALLEYWAY
(Sewer or Drain Repair/Replacement)**

Date application submitted: _____

Address of location work is to be performed: _____

Describe Type & Location of Work (In right-of-way, street, alleyway, etc.): _____

(see page 3 for addition space for description)

Start Date: _____ To Completion Date: _____ requesting permission to work in public right-of-way, street or alleyway.

Property Owners Name: _____ Mailing Address: _____

City: _____ State: _____ Zip Code: _____

CONTRACTOR INFORMATION

Company Name: _____

Street Address: _____ City: _____ State: _____ Zip Code: _____

Office Ph#: _____ Fax Ph#: _____ E-mail: _____

Important: At least 24 hours' notice must be given to the DPW Superintendent before any public right-of-way, street and / or alleyway can be opened for the purpose of repair/laying a private sewer or drain, and such work may not proceed until approval of the Superintendent is obtained. All excavations for building sewer installation/repair shall be adequately guarded with barricades and lights so as to protect the public from hazard. Streets, sidewalks, parkways, alleyways and other public property disturbed in the course of the work shall be restored in a manner satisfactory to the city. All refilling of the excavation made for such connection shall be under the supervision of the city officials responsible for streets. Sewer or drain work located in public right-of-way, street and / or alleyway must be inspected by the city before covering. Sewer or drain work performed on abutting private property requires a separate plumbing permit. *(for permit information contact City Office at 517-448-8983).*

Liability insurance policies are required to be filed in making application for permit, they shall be in not less than the following minimum amounts, except as otherwise specified.

- (1) On account of injury to or death of any person in any one accident, \$500,000.00;

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(2) On account of any one accident resulting in injury to or death of more than one person, \$1,000,000.00;

(3) On account of damage to property in any one accident, \$50,000.00.

Where, in the opinion of the superintendent, a greater risk is involved, higher limits of coverage may be required. **A certificate-duplicate executed copy or photo copy of the original of such insurance policy is required to be submitted with this application.**

Name of Insurance Company: _____ Office Ph# _____

Expiration Date of Insurance: _____

You Must Call MISS DIG. Enter MISS DIG Ticket Number: _____
(Ticket number given by MISS DIG at time of contact)

APPLICANT INFORMATION

Applicants Name (print): _____

Street Address: _____ City: _____ State: _____

Zip Code: _____ Phone Number: _____ Cell Phone Number: _____

Type of License: _____ License# _____ Expiration Date: _____

Applicants Signature: _____ Date: _____

IMPORTANT NOTE: Work in State Trunklines (street / right-of-way) requires additional permit from Michigan Department of Transportation (MDOT).

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If needed, use this area for descriptive drawing of work location.



If needed , use this area for additional written description of type and location of work:
