



City of Fort Mitchell

2355 Dixie Highway
Fort Mitchell, Kentucky 41017
Public Works Department

APPLICATION FOR PERMIT TO CUT, EXCAVATE OR BORE IN THE CITY RIGHT OF WAY

UTILITY COMPANY _____
ADDRESS _____

PHONE # _____ EMERGENCY # _____

Street _____
Sidewalk _____
Sod Area _____
New Construction _____

NAME OF CONTRACTOR _____

Occupational License # _____

ADDRESS _____

PHONE # _____ EMERGENCY # _____

LOCATION OF PROJECT: _____

DESCRIPTION OF WORK: _____

(Please attach 2 sets of plans indicating purpose of cut, width, depth, name of street and approximate location, i.e. street address and nearest cross street)

EXPECTED DATE OF OPENING _____ ANTICIPATED DATE OF CLOSING _____

***APPLICANT SHALL CONTACT PUBLIC WORKS DEPARTMENT UPON COMPLETION OF ALL RESTORATION WORK TO SCHEDULE FINAL INSPECTION (859) 331-1212.**

THE APPLICANT OF THIS PERMIT TO CUT, EXCAVATE OR BORE IN THE CITY RIGHT OF WAY AGREES TO COMPLY WITH THE REGULATIONS OF THE CITY OF FORT MITCHELL PURSUANT TO CITY ORDINANCE CHAPTER 93.25-93.30

Date of Application

Signature of Applicant

Office Use Only	
Type of Bond Posted _____	Amount of Bond Posted _____
Permit Number _____	Permit Fee _____
APPROVED BY: _____	DATE: _____