YEARLY PERMIT NO	PROJECT NO.:
	FEE AMOUNT:

CITY OF KENAI Individual Project Application Permit for Excavations in or Adjacent to City Right-of-Way

Contractor Name:	Date:
Address:	Term of Permit: days
Phone:	
Email:	Start: (within 20 days)
Property Owner Name:	End:
Address:	
Phone:	1 1 2 1 2 1 1 1
Email:	If yes, please attach plans
Location of Project:	
Detailed Description of work to be performed:	
If connecting to City water and/or sewer are the taps existin	g to the property YES NO N/A
If NO, provide details or plans to connect into City lines. Wa	ter/Sewer Permit #
Connection Size- Water Sewer	
The contractor must notify the following prior to digging	: To locate utility lines call 811. City of Kenai is
not on the 811 list.	, , , , , , , , , , , , , , , , , , ,
a) Telephone Co b) Electric Co. c) Gas Co d) Cable TV	i) City- Water and Sewer
e) Police f) Fire	
g) Gas Pipeline h) City– Metal Streetlig	ghts
If you are a utility company, are you placing your utility in	the proper location? Per KMC 18.27.010
YES NO If NO, you need an exception issued by the City of Kenai.	
in the, year need an exception issued by the Oity of Nerial.	
	
**************************************	Applicant's Signature and Title
For City Use:	
Inspection fee: Has been paid; will be billed _ No fee due to water/sewer project; C	
The above-described project is approved for excavation only frost susceptible material will be placed in roadway excall Landscaped areas will be with topsoil and seed. Surface	vations with six-inch, Type I gravel on surface.
Approved by:	Date:
Title: Public Works Director	

PERMIT IS TO BE AVAILABLE AT PROJECT SITE