



Town of Smithfield  
 Planning Department  
 350 E. Market St Smithfield, NC 27577  
 P.O. Box 761, Smithfield, NC 27577  
 Phone: 919-934-2116  
 Fax: 919-934-1134

## Right-Of-Way Encroachment Application

### 1. Applicant Information

<i>Owner or County:</i>		<i>Address:</i>	
<i>Phone:</i>	<i>Fax:</i>		
<i>E-mail:</i>			
<i>Field Contact Name:</i>		<i>Field Contact Phone:</i>	

### 2. Contractor Information

<i>Name:</i>		<i>Address:</i>	
<i>Phone:</i>	<i>Fax:</i>		
<i>E-mail:</i>			
<i>Field Contact Name:</i>		<i>Field Contact Phone:</i>	

### 3. Project Information

<i>Address or Location:</i>	
<i>Type of Work (check all that apply):</i> <input type="checkbox"/> Telephone <input type="checkbox"/> Gas <input type="checkbox"/> Electric <input type="checkbox"/> Water <input type="checkbox"/> Sewer <input type="checkbox"/> Storm Drain <input type="checkbox"/> Cable <input type="checkbox"/> Other:	
<i>Detailed Description of work to be done:</i>	
<i>Estimated Start Date:</i>	<i>Estimated End Date:</i>
<i>Estimated Value of Work (Value of any grading, concrete work, paving patching, site restoration, etc. shall be provided by the applicant – List all items and associated costs as an attachment)</i>	

	Asphalt Street	Concrete Street	Curb	Sidewalk	Alley	Other:
<i>Excavation L x W x D:</i>						
<i>Surface Cuts L x W:</i>						

List Streets, Lanes, and/or Sidewalks that will be closed during construction:	Estimated Closure Date	Duration

<i>List of Attachments:</i>
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I (we) hereby agree to be bound by the provisions of this permit, all applicable State and Federal Laws, all Town of Smithfield Standards, Specifications, Ordinances, and any other applicable regulatory requirements. I (we) agree that this permit shall become invalid, if during the performance of the work, a violation of the above occurs. Should a violation occur, and corrective actions directed by the Town of Smithfield is not performed, I (we) understand that this permit shall be deemed "cancelled" and corrective actions will be performed and/or all improvements will be removed by a Third Party at the permit holder's sole expense.

**Applicant Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Print Name:** \_\_\_\_\_ **Title / Authority:** \_\_\_\_\_

**Standard Provisions:**

1. The Town reserves the right to require any additional information he so desires, including design standards, drawings, and any other pertinent data.
2. The Town will respond to the permit application within three (3) consecutive working days. Street cuts require additional permitting but in emergency situations that threaten public health and safety are allowed without a permit; however, a permit application shall be submitted the next business day.
3. A site plan is required for new construction and for revisions or relocations of existing infrastructure
4. Applicant is responsible for locating all existing utilities and is responsible for any repairs to existing utilities damaged as a result of the construction activities.
5. A surety bond is required for work in the right of way equal to 1.25 x the valuation of the work unless waived by the Public Works Director.
6. A copy of the approved permit must be kept available on the job site for the duration of work
7. All surfaces disturbed by the construction activity shall be restored or re-installed to pre-construction conditions.
8. Sidewalk and curb and gutter shall be removed to the nearest joint if within five (5) feet.
9. All construction activities shall be performed in a safe manner. All construction areas shall be continuously maintained in a safe manner, and shall not create any public hazards.
10. The permittee shall be responsible for the repair of any deficiencies in the right-of-way caused by the construction for two years after completion date. Failure to respond within 48 hours will authorize Town forces to make necessary repairs and back charge those repairs to the permittee. Emergency conditions will be repaired by the Town immediately and back charged.
11. Asphalt and concrete restoration shall be completed within 10 working days of completion of trench backfill operations. If pavement cannot be repaired with hot mix, it shall be cold patched and maintained as necessary throughout the winter. When hot mix becomes available, the temporary cold patch shall be removed and replaced with hot mix.
12. Issuance of this permit does not represent or guarantee the location or existence of any public right-of-way. The permittee is responsible for verifying the location of all right-of-ways.
13. Issuance of this permit does not grant any right to access or use private property.
14. The permittee is responsible for obtaining all necessary private or public easements for the proposed project.
15. Contractor shall notify The Towns one working day prior to work being performed, and also one working day prior to any required inspections.
16. All Traffic Control must meet the NCDOT Manual for Uniform Traffic Control Devices standards and the placement and maintenance of devices are the sole responsibility of the applicant.
17. The Town reserves the right to stop any activity if adequate traffic control and/or safety devices are not utilized.
18. The applicant must notify all affected residents and businesses at least 48 hours in advance of a street closure.

**Special Provisions:**

- ( ) *Traffic Control Plan Required*
- ( ) *Site Plan required in digital form to include digital data in ESRI digital shape file format.*
- ( ) *Side walk closing plan and traffic control plan.*
- ( ) *Limited Construction Activity hours:*
- ( ) *Financial Security Required (Bond, Letter of Credit, Letter of Responsibility)*
- ( ) *Inspections Required:*
- ( ) *Other Permits Required:*
- ( ) *Permit Fee:*
- ( ) *Permit expiration Date:*
- ( ) *Other:*

Work Authorized By: \_\_\_\_\_ Public Works Director  
Date: \_\_\_\_\_

Inspection Authorized By: \_\_\_\_\_ Public Works Director  
Final Inspection Passed \_\_\_\_\_ Date: \_\_\_\_\_

**Please call Public Utilities Director Lawrence Davis (919) 934-2580 to schedule the final inspection.**

**OFFICE USE ONLY:**

**Date: \_\_\_\_\_ Cash \_\_\_\_\_ Check# \_\_\_\_\_ Credit Card \_\_\_\_\_ Amount \$ \_\_\_\_\_**