



**Right-of-Way Permit**

**Permit #:** \_\_\_\_\_ **Date Issued:** \_\_\_\_\_ **Final Inspection:** \_\_\_\_\_

**Applicant hereby requests that they be granted a permit to make a cut into the City of Claremore Right-of-Way described as follows:**

Please circle (one) indicating the appropriate type of utilities permit you are applying for:

Water Service	Sewer Service	Gas Service	Main
Telephone	Cable TV	Electric	Other

Physical address of cut in the City Right-of-Way will be:

Subdivision: \_\_\_\_\_

The cut in the City Right-of-Way will be : \_\_\_\_\_ Width: \_\_\_\_\_ Length: \_\_\_\_\_

The proposed starting date of cut is: \_\_\_\_\_ Completion Date: \_\_\_\_\_

<b>Applicant</b>	_____	<b>Contractor</b>	_____
Name:	_____	Name:	_____
Address:	_____	Phone #:	_____
City:	_____	Authorized Agent:	_____
State / Zip:	_____	Agent's Address:	_____
Phone #:	_____	Agent's Phone #:	_____
Word Order #:	_____		

**Requirements:**

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**CLAREMORE, OKLAHOMA**

**Approved By:** \_\_\_\_\_

In accepting this permit, the undersigned verified that they have read and understand all of the City of Claremore regulations for the Right-of-Way permit.

**PERMITEE:** \_\_\_\_\_ Print Name: \_\_\_\_\_

Applicant Signature: \_\_\_\_\_