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P.O. Box 37
St. Albans Bay
Vermont 05481

Phone
802-524-7589

Fax
802-524-5816

Website
www.stalbanstown.com

**Town of St. Albans, Vermont
Install Utilities in Town Right-Of-Way Permit Application**

Today's Date: _____

Applicant Name: _____

Applicant Address: _____

Applicant E-mail: _____ Phone No.: _____

Type of Utility to be Installed: _____

Installation to be Performed by: _____

Location of Installation: _____ Proposed Installation Date: _____

Please check that the following application elements are attached to this application:

Site Plan that Includes:

- Name(s) of affected road(s);
- Closest residence numbers(s);
- GPS coordinates of proposed utility location(s);
- Narrative of project description including what will be installed, how it will be installed, at what depth and how it will be sleeved.

Traffic Control Plan that Includes:

- Required Dig Safe information;
- Liability Insurance Certificate naming the Town of St. Albans as additional insured.

Fees: \$200 (\$100/Permit & \$100/Inspection)

By signing this application, you agree that you have been provided with, read, understand, and will comply with all the requirements of the **Town of St. Albans Installation of Underground Utilities Policy**.

Applicant Signature

Date

*Submit complete application and fees to: Director of Public Works
Town of St. Albans
PO Box 37
St. Albans Bay, VT 05481

Only complete applications will be reviewed. Permit decisions will be made within 7 business days from receipt of complete application.

David Allerton, Director of Public Works

Date of Approval