**Cut Fees:**

**1 to 100 Square Feet: $300.00**

**For each additional Square Foot: $2.00/Sq. Ft.**

# General Notes and Guidelines

* No traffic lane closures from7:00 pm until 7:00 am Monday through Friday.
* No traffic lane closures from 1:00 pm Friday until 7:00 am Monday.
* All traffic control must meet MUTCD standards. All flag persons must be certified.
* Placement and maintenance of traffic control devices are the responsibility of the applicant.
* Emergency access must be provided at all times.
* All street closures performed on or near a Holiday shall require special approval.
* No required building exits can be blocked at any time during construction.
* The City reserves the right to stop any activity if proper devices are not in place or unsafe conditions exist.
* Right-of-Way Use/Road Closure Permit must be attached to this permit.

CC:

Fire Department

Police Department

Streets Division

Water Division

Transit Division

Planning Division

**Approval for Issuance by:**

Public Works Department: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date: \_\_\_\_\_\_\_\_\_\_\_\_\_

*Applicant hereby agrees to comply with the City of Black Hawk Municipal Code, approved plans and any other ordinances, law, and regulation, and that this permit shall be invalid should a violation occur and/or correction directives are not followed. In addition, the Applicant hereby agrees to comply with the conditions of this permit and approved traffic control plans, and agrees to notify affected residents and businesses at least 48 hours in advance of a street/sidewalk closure. Permittee is to be responsible for any settlement for two years from the final acceptance date.*

**CITY USE ONLY BELOW THIS LINE**

Proof of Insurance (In accordance with section 11-35(d) of the Black Hawk Municipal Code) Rec’d:

Contractor has City of Black Hawk License?

Conditions of Approval:

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

Inspections required (notify Public Works Department at least 24 hours in advance): Yes\_\_\_\_\_No\_\_\_\_\_

Inspection Report (include Date):

Final Acceptance of restoration of Right of Way: Date:

Cut Sq. Ft. Total: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Cut Fee: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (Amount)

Applicant Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Main Contact:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone Number:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Cell Phone Number:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Applicant’s Address\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ State\_\_\_\_\_\_ Zip\_\_\_\_\_\_\_

Applicant’s Signature:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address or location for closure:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

Start Date:\_\_\_\_\_\_\_\_\_\_\_\_ End Date:\_\_\_\_\_\_\_\_\_\_\_\_\_

Does work require a water main shutdown?

Yes\_\_\_\_\_No\_\_\_\_\_

**STREET CUT PERMIT**

City of Black Hawk

987 Miners Road

P.O. Box 68

Black Hawk, Colorado 80422

Public Works: 303-582-1324 (phone)

Public Works: 303-582-2250 (fax)

