



**UTILITY
CONSTRUCTION
PERMIT
APPLICATION**

**P. O. Box 190
103 North Wall Street
Iowa Park, TX 76367-0190
940-592-2131
www.iowapark.com**

CONTRACTOR INFORMATION

NAME: _____ COMPANY: _____

MAILING ADDRESS: _____

DAYTIME PHONE: _____ FAX NUMBER: _____

CONTACT PERSON: _____

E-MAIL ADDRESS: _____ CELL: _____

CONTRACTOR'S LICENSE NUMBER: _____

EXPIRATION DATE: _____ BOND _____ INSURANCE _____
(CHECK ONE)

PROJECT INFORMATION

JOB ADDRESS/LOCATION: _____

CROSS STREET(S): _____

LINEAR FOOTAGE OF TRENCH/BORE CUT: _____

PROJECT DESCRIPTION: _____

over

DETAILED PROJECT SITE PLAN SUBMITTED: YES _____ NO _____
(CHECK ONE)

PROJECT START DATE: _____ PROJECT END DATE: _____

***Call ONE CALL for locates at least two (2) days prior to digging or boring.
"IT'S THE LAW!"***

I, _____, declare that I am the applicant involved in this application and that the foregoing statements and answers herein contained and the information herewith submitted are in all respects true and correct to the best of my knowledge and belief. I hereby designate _____ to act as my agent with respect to this application. I have received a copy and will comply with the attached City of Iowa Park's utility construction permit terms and conditions.

SIGNATURE: _____ DATE: _____

FOR CITY USE ONLY

FEE: _____ \$ _____

PERMIT FEE: (includes first 500 linear feet):	\$50.00	\$ _____
OVER 500 LINEAR FEET (per 300 linear feet):	\$5.00 x _____	\$ _____
PERMIT FEE: (includes up to 10 service drops):	\$50.00	\$ _____
OVER 10 SERVICE DROPS (per service drop):	\$5.00 x _____	\$ _____
RE-ISSUANCE FEE:	\$20.00	\$ _____

APPLICATION RECEIVED BY: _____ DATE: _____

PERMIT APPROVED BY: _____ DATE: _____