

CITY OF BALLWIN
 200 Park Drive, Ballwin, MO 63011
 Phone: (636) 227-9000
 Fax: (636) 207-2360

**RIGHT-OF-WAY USER
 PERMIT / APPLICATION**

PERMIT FEE: \$100.00

ALL INFORMATION PERTAINING TO THE WORK INVOLVED SHOULD BE INCLUDED ON THIS APPLICATION

APPLICATION DATE _____ JOB ADDRESS _____

Service Provider Name	Phone #
Address	Email:

Contractor Name	Phone #
Address	Email:

SCOPE OF WORK

THIS PERMIT IS TO COVER THE FOLLOWING WORK:

- Service provider monthly gross receipts: \$ _____
- Length of facility: _____ miles
- Number of antenna: _____
- Project start date: _____
- Project complete date: _____
- Other: _____

Description and dimensions of work (attach drawings):

All work is to be performed in accordance with Ballwin ordinances and the General Provisions and Conditions as stated on the reverse side of this application, as well as the following special provisions:

CALL 24 HOURS PRIOR TO COMPLETION OF WORK FOR INSPECTIONS.

**The owner or owner's contractor shall call 636-227-9000 a minimum of 24 hours prior to the completion of the work to allow the City to conduct the necessary inspections.*

Contractor _____

Contractor Signature _____

Address _____

City/State/Zip _____

Phone _____

Email _____

Service Provider Name _____

Service Provider Signature _____

Address _____

City/State/Zip City/State/Zip _____

Phone _____

Email _____

DOES THE APPLICANT HOLD A RIGHT-OF-WAY FRANCHISE AGREEMENT WITH THE CITY? (Circle one)..... YES..... NO

IF NO, the applicant shall pay to the City as monthly compensation for use of the right-of-way:

First mile of linear facilities..... \$5,000

Feet of linear facilities exceeding one mile x \$1.90/linear ft. = \$ _____

MONTHLY RENTAL FOR LINEAR FACILITIES (not to exceed \$30,000) \$ _____

First 15 antennae..... \$1,000

Number of antennae in excess of 15 x \$65 = \$ _____

MONTHLY RENTAL FOR ANTENNAE \$ _____

TOTAL MONTHLY RENTAL \$ _____

DO NOT WRITE IN THIS SPACE - OFFICE USE ONLY

PERMIT # _____
 DATE: _____
 APPROVED: _____