



Date Received: \_\_\_ / \_\_\_ / \_\_\_

**Applicant Information**

Contact Name: \_\_\_\_\_ Company: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City / State / Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

**1. Dates:**

Start Date: \_\_\_ / \_\_\_ / \_\_\_ Completion Date: \_\_\_ / \_\_\_ / \_\_\_

**2. Location of R.O.W. Work:**

\_\_\_\_\_

**3. Purpose for Application:**

\_\_\_\_\_

**4. How will traffic be maintained:**

\_\_\_\_\_

**5. Equipment to be Used:**

\_\_\_\_\_

*The Undersigned hereby applies for a right-of-way permit, to be issued on the basis of the representation contained herein, all of which the applicant swears to be true. The applicant further agrees to conform to all Village regulations in force on the date of the application for the area represented.*

Applicants Signature: \_\_\_\_\_ Date: \_\_\_ / \_\_\_ / \_\_\_ Fee Paid: \_\_\_\_\_

**Right-of-Way Permit:**

Village Engineer Signature: \_\_\_\_\_ Date: \_\_\_ / \_\_\_ / \_\_\_

Zoning Administrator Signature: \_\_\_\_\_ Date: \_\_\_ / \_\_\_ / \_\_\_

\_\_\_\_\_ Approve \_\_\_\_\_ Deny

\_\_\_\_\_ Approve with Conditions

Conditions (if applicable): \_\_\_\_\_

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



*Village of Commercial Point*

P.O. Box 56

Commercial Point, Ohio 43116

(614) 877-9248

**Right-of-Way Application**

**Guidelines for Submission of Application**

1. All completed applications must be filed with the Municipal Office prior to the start of any work.
2. The Village may require inspections during or upon completion of the work.
3. The Village may require bonds prior to any work being performed.
4. See Section 1197 of the Village of Commercial Point Zoning Code for all submission requirements and procedural information relative to this application.