

RIGHT-OF-WAY APPLICATION

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| PROPERTY ADDRESS: | |
| Name of Applicant: | |
| Applicant Address: | Postal Code: |
| Phone (Business): | Alternate Phone: |
| Email Address: | |

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|---|------------------|
| Name of Property Owner: <input type="checkbox"/> Same as above OR: | |
| Mailing Address: | Postal Code: |
| Phone (Business): | Alternate Phone: |
| Email Address: | |

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| DESCRIPTION OF WORK: |
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WORK TYPE (COMPLETE ALL THAT APPLY):

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|---|---|---|
| <input type="checkbox"/> DRIVEWAY | | <input type="checkbox"/> DRAWING PROVIDED |
| Proposed Work: | <input type="checkbox"/> New Driveway <input type="checkbox"/> Replacement of Existing Driveway _____ Total number of Driveways | |
| Type of Approach: | <input type="checkbox"/> Residential - There is a minimum of 8'-0" from the house to side property line: <input type="checkbox"/> No <input type="checkbox"/> Yes | |
| | <input type="checkbox"/> Commercial / Industrial Site Plan Control Number (If Applicable) _____ | |
| Driveway Material: | | |
| <input type="checkbox"/> Concrete <input type="checkbox"/> Asphalt <input type="checkbox"/> Other – Material Type _____ (Driveway Waiver required with application – See website) | | |
| New Curb Cut? | <input type="checkbox"/> No <input type="checkbox"/> Yes | Total Width Requested: _____ |

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| <input type="checkbox"/> CULVERT/DITCH (AS-209A) | | <input type="checkbox"/> DRAWING PROVIDED |
| Type of Work: | <input type="checkbox"/> Proposed Driveway Culvert <input type="checkbox"/> Modify Existing Driveway Culvert <input type="checkbox"/> Proposed Ditch Infill | |
| Adjacent Culvert Diameter: | Diameter Upstream: _____ | Diameter Downstream: _____ |
| Proposed Pipe Material: | _____ | Proposed Pipe Diameter: _____ |
| Existing Culvert Information (If Applicable): | Existing Diameter: _____ | Existing Culvert Material: _____ |
| Applied for the Culvert Rehabilitation Program (Visit E-Services on the City of Windsor Website) : | | <input type="checkbox"/> No <input type="checkbox"/> Yes |

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| <input type="checkbox"/> SEWER (CHECK ALL THAT APPLY) | | <input type="checkbox"/> DRAWING PROVIDED |
| Permit Type: | <input type="checkbox"/> New Tap/Connection <input type="checkbox"/> Replacement of Existing Connection | |
| Type of Connection: | <input type="checkbox"/> Sanitary – Proposed Diameter _____ <input type="checkbox"/> Storm – Proposed Diameter _____ | |
| Requested Number of Connections: | ____ Sanitary Connection(s) | ____ Storm Connection(s) |
| Property Type: | <input type="checkbox"/> Residential <input type="checkbox"/> Commercial/Industrial | |
| Site Plan Control Number (If Applicable): | _____ | Stormwater Management Plan Required: <input type="checkbox"/> No <input type="checkbox"/> Yes |
| Location of Connection(s): | <input type="checkbox"/> Existing Connection at Property Line <input type="checkbox"/> Tapping the Sewer Main <input type="checkbox"/> Unknown | |

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| <input type="checkbox"/> HOARDING (CHECK ALL THAT APPLY) | | <input type="checkbox"/> DRAWING PROVIDED |
| Hoarding Type: | | |
| <input type="checkbox"/> Boulevard, Sidewalk or Alley <input type="checkbox"/> Roadway | Start Date: _____ End Date: _____ | |
| Closure Type: | | |
| <input type="checkbox"/> Day Closure (Daylight Hours Only) <input type="checkbox"/> Detour Plan Reviewed By Traffic Operations | | |
| <input type="checkbox"/> Overnight Closure <input type="checkbox"/> Detour Plan Reviewed By Traffic Operations | <input type="checkbox"/> Insurance Provided | |

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|---|---|---|
| <input type="checkbox"/> FLATWORKS | | <input type="checkbox"/> DRAWING PROVIDED |
| <input type="checkbox"/> Paved Areas (Other than Driveways) | <input type="checkbox"/> Lead Walks | |
| <input type="checkbox"/> Artificial Turf | <input type="checkbox"/> Flush to Grade Access Box/Landscape Border | |

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|--|--|---|
| <input type="checkbox"/> MOVING (OVERSIZE/OVERWEIGHT) | | <input type="checkbox"/> DRAWING PROVIDED |
| <input type="checkbox"/> Route Approved By Traffic Operations and Approval Form Attached | | <input type="checkbox"/> Insurance Provided |

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| <input type="checkbox"/> SIGN | | <input type="checkbox"/> DRAWING PROVIDED |
| <input type="checkbox"/> A-Frame Sign (Reference <i>A-Frame Conditions – ROW 2018</i>) | Sign Dimensions: _____ | |
| <input type="checkbox"/> Community Event Sign - Charitable Registration Number: _____ | Sign Dimensions: _____ | |
| <input type="checkbox"/> Memorial Sign - City Fabricated: <input type="checkbox"/> No <input type="checkbox"/> Yes | Sign Dimensions (30cm x 45cm MAX): _____ | |
| <input type="checkbox"/> Streetlight Pole Location (nearest intersection): _____ | Streetlight Pole Number: _____ | |

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|--|----------------------------|--|
| <input type="checkbox"/> SIDEWALK SALE | | <input type="checkbox"/> MAP OF EVENT PROVIDED |
| Date(s) of Event: _____ | | |
| Location of Event (include all streets): _____ | | |
| Start Time of Event: _____ | Start Time of Event: _____ | <input type="checkbox"/> Certificate of Insurance Provided |

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|---|---|--|
| <input type="checkbox"/> MINOR RESIDENTIAL ENCROACHMENTS (CHECK ALL THAT APPLY) | | <input type="checkbox"/> DRAWING PROVIDED |
| <input type="checkbox"/> Decorative Rocks or Boulders | <input type="checkbox"/> Plastic Landscape Borders | <input type="checkbox"/> Single Step as part of a Leadwalk |
| <input type="checkbox"/> Landscape Logs | <input type="checkbox"/> Lawn Ornaments | <input type="checkbox"/> Picket Fence with No Foundation |
| <input type="checkbox"/> Certificate of Insurance Provided | <input type="checkbox"/> Confirmation that No Major Residential Encroachments Exist | |

| OTHER ROW APPLICATIONS (COMPLETE AND SUBMIT ALL THAT APPLY) | | APPLICATION LINK |
|--|--|---|
| <input type="checkbox"/> Encroachments (Major Residential, Partially Exempt and Non-Residential) | | Encroachments City of Windsor |
| <input type="checkbox"/> Utilities | | Citizen Portal Website |
| <input type="checkbox"/> Sidewalk Café | | Sidewalk Cafe City of Windsor |

Application is hereby made by the applicant listed above for permission to undertake the work described herein and in consideration of the granting of permission, the applicant hereby covenants and agrees to save harmless and indemnify the Corporation of the City of Windsor from and against all losses or damages and from all actions or claims which may be brought or made against the city in consequence of such work or resulting therefrom in any way.

The applicant further covenants and agrees to do all of the work and everything incidental thereto in accordance with the instructions of the City Engineer and with all possible diligence and dispatch.

The applicant further agrees that upon failure to comply with the provisions of a permit for the above work, the permission granted may be withdrawn or cancelled without notice by the City Engineer.

NOTICE WITH RESPECT TO COLLECTION OF PERSONAL INFORMATION:

I / We also acknowledge that the information requested on this form is collected under the authority of *The Municipal Act, R.S.O. 2001* as amended. The information is required in order to process the application to administrative staff for review. The name and business address of the applicant and/or authorized agent is public information. The address of the property, which is the subject of the application, is also public information. Any other personal information will only be used for internal purposes.

APPLICANT’S NAME (PRINT): _____ DATE: _____

APPLICANT’S SIGNATURE: _____

SUBMISSION OPTIONS:

VIA EMAIL:
engineeringdept@citywindsor.ca

IN PERSON:
350 City Hall Square West - Suite 210
Windsor, ON, N9A 6S1

PAYMENT CAN BE MADE BY VISA, MASTERCARD, DEBIT, CASH OR CHEQUE

FOR APPLICATION INQUIRIES CONTACT:
Telephone: (519) 255-6257 ex. 6483 or 6359
Email: engineeringdept@citywindsor.ca

PLEASE NOTE THIS IS NOT A PERMIT