

**CITY OF OWATONNA**  
**ENGINEERING DEPARTMENT**

Phone: (507) 444-4350

540 West Hills Circle  
Owatonna, MN 55060

**APPLICATION TO CONSTRUCT SIDEWALK, DRIVEWAY OR CURB CUT**

NAME OF APPLICANT: \_\_\_\_\_

ADDRESS: \_\_\_\_\_ CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP CODE: \_\_\_\_\_

CONTACT PERSON: \_\_\_\_\_ PHONE NO.: \_\_\_\_\_

CONTACT EMAIL: \_\_\_\_\_

PROPERTY ADDRESS: \_\_\_\_\_

PROPERTY OWNER: \_\_\_\_\_

PERMIT REQUESTED: SIDEWALK  CURB CUT  DRIVEWAY

NATURE OF WORK: REPAIR  CONSTRUCT NEW

LENGTH: \_\_\_\_\_ DESCRIPTION: \_\_\_\_\_

- **Contractor shall furnish the City with a Certificate of Public Liability Insurance before construction commences in an amount of at least \$1,000,000 combined single limit or equivalent naming the City as "additional insured"**
  - INSURANCE RECEIVED:
- Contractor must schedule inspections 48 hours in advance by calling 507-444-4350
- All Sidewalk, curb, gutter and driveway replacement work shall be completed by Sept. 15 and all turf establishment shall be completed by October 15th.
- **No Curb Cuts, Driveway or Sidewalk Permits issued between November 15 – March 1 without permission from the City Engineer**

I, We, the undersigned, herewith accept the terms and conditions of the City of Owatonna and agree to fully comply therewith to the satisfaction of the City Engineer.

**DATE:** \_\_\_\_\_ **APPLICANT SIGNATURE:** \_\_\_\_\_

**FEES:**

Sidewalk Permit \$20.00: \_\_\_\_\_ Curb Cut or Driveway Permit \$50.00: \_\_\_\_\_

Total: \_\_\_\_\_ Cash  Check  Receipt Number: \_\_\_\_\_

**DATE:** \_\_\_\_\_ **APPROVED BY:** \_\_\_\_\_ **PERMIT NO.:** \_\_\_\_\_  
City Engineer

**INSPECTION:**

INSPECTING ENGINEER: \_\_\_\_\_ DATE: \_\_\_\_\_

NOTES: \_\_\_\_\_