



Public Works Department
 360 SW Avery Avenue
 Corvallis, OR 97333
 Phone: 541-766-6821
 Fax: 541-766-6891

APPLICATION AND PERMIT TO CONSTRUCT A UTILITY LINE

NAME _____
 ADDRESS _____
 CITY _____ STATE _____
 TELEPHONE _____ ZIP _____
 APPLICANT _____
 CONTRACTOR _____
 24-HOUR CONTACT TELEPHONE _____
 DATE WORK IS TO BEGIN _____

OFFICE USE ONLY	
PERMIT NO.	_____
ROAD NO.	_____
ROAD NAME	_____
MILE POST _____	TO _____
T _____ R _____	Sec. _____
SMA PRESENCE	<input type="checkbox"/> TYPE 1 <input type="checkbox"/> TYPE 2 <input type="checkbox"/> N/A

I HEREBY DECLARE THAT I HAVE LAWFUL AUTHORITY TO APPLY FOR THE PERMIT AND WILL ABIDE BY THE STANDARDS AS SET FORTH HEREIN AND

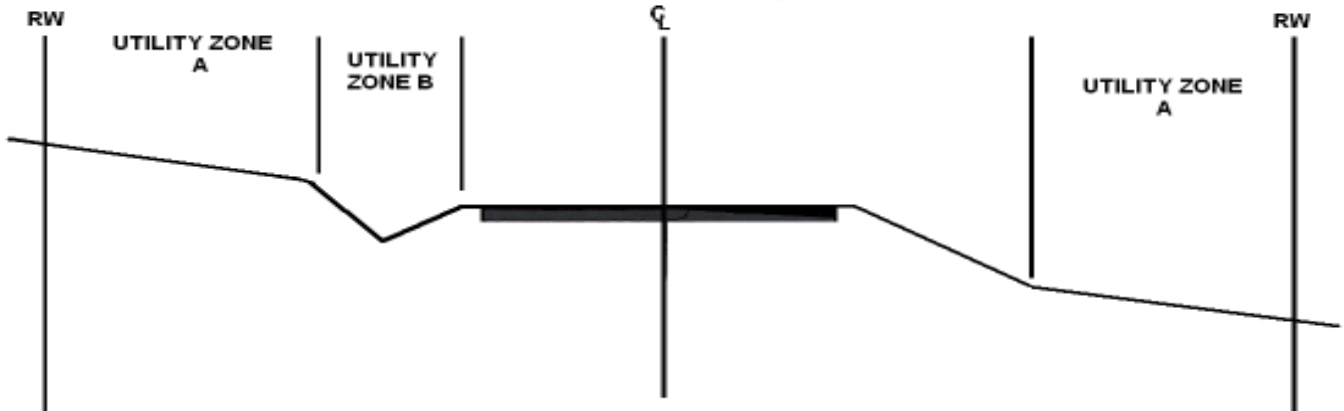
APPLICANT _____ DATE _____

UPON COMPLETION, NOTIFY BENTON COUNTY PUBLIC WORKS 541-766-6821. ALWAYS REFER TO PERMIT NUMBER

ADDITIONAL DATA: _____

- THIS PERMIT EXPIRES IF WORK IS NOT STARTED WITHIN 60 DAYS AND NOT COMPLETED WITHIN 180 DAYS.
- CALL 24 HOURS PRIOR TO REQUIRED INSPECTIONS • TRAFFIC FLAGGING WILL BE PERFORMED BY CERTIFIED FLAGGERS ONLY.
- ANY FACILITY EXTENDING ABOVE GRADE MUST BE MAINTAINED IN A HIGHLY VISIBLE CONDITION TO AVOID DAMAGE FROM ROUTINE ROAD MAINTENANCE OPERATIONS.
- CALL BEFORE YOU DIG 1-800-332-2344 (OR 811)

**TYPICAL SECTION
 (SHOW PROPOSED UTILITY LOCATION FROM CL OR RIGHT-OF-WAY LINE)**



(FOR COUNTY USE)

SPECIAL PROVISIONS: _____

DATE _____

PERMIT RECOMMENDED BY _____

PERMIT AUTHORIZED BY _____

FOR PUBLIC WORKS DIRECTOR

INSPECTED BY _____ DATE _____ COMPLETION DATE _____ BY _____
 (OVER)

STANDARD PROVISIONS

PLANS

WHERE CONFLICTS WITH EXISTING UTILITIES OR ROADSIDE APPURTENANCES APPEAR TO BE INEVITABLE, THE COUNTY MAY REQUIRE MORE DETAILED PLANS IN ORDER TO UNDERSTAND THE IMPACTS AND PROPOSED MITIGATION. IF SUBMITTING SCHEMATIC DRAWINGS DESCRIBE THE NATURE AND EXACT LOCATION OF THE WORK IN THE ADDITIONAL DATA SECTION.

TRAFFIC CONTROL

TRAFFIC CONTROL SHALL CONFORM TO THE MOST RECENT EDITION OF THE ODOT SHORT TERM TRAFFIC CONTROL HANDBOOK.

CONSTRUCTION / INSTALLATION

1. ALL WORK SHALL BE PERFORMED IN ACCORDANCE WITH RULES ADOPTED BY THE OREGON UTILITY NOTIFICATION CENTER.
CALL 1-800-332-2344 (OR 811) FOR A LINE LOCATE TWENTY-FOUR (24) HOURS PRIOR TO CONSTRUCTION
2. INSTALLATIONS WITHIN THE LIMITS OF PAVING, SHALL BE PLACED BY BORING OR PUSHING UNLESS OTHERWISE PERMITTED. WHEN EXPRESSLY ALLOWED UNDER THE PERMIT, TRENCHING WITHIN THE ROADWAY AREA SHALL CONFORM TO THE ROAD TRENCH DETAIL (SEE ATTACHED).
3. PLOWING WILL BE ALLOWED IN UTILITY ZONE "A" ONLY.
4. BACKFILL:
Zone A-- NATIVE MATERIAL COMPACTED TO 90 PERCENT RELATIVE MAXIMUM DENSITY.
Zone B--1"-0 CRUSHED AGGREGATE BASE ROCK PLACED IN SIX (6) INCH LIFTS AND COMPACTED TO 95 PERCENT RELATIVE MAXIMUM DENSITY.
5. CONTRACTORS SHALL NOTIFY BENTON COUNTY FORTY-EIGHT (48) HOURS BEFORE CONSTRUCTION 541-766-6821. CONTRACTORS WILL HAVE A SET OF PLANS AND AN AUTHORIZED COPY OF THIS PERMIT ON THE JOB DURING CONSTRUCTION.
6. ALL UTILITY LINES, CONDUITS, APPURTANCES, OTHER STRUCTURES INSTALLED UNDER THIS PERMIT SHALL BE PLACED SUCH THAT THERE SHALL BE NO INTERFERENCE WITH NORMAL ROAD MAINTENANCE.
7. WORK NOT COMPLETED TO THE SATISFACTION OF THE COUNTY ENGINEER, SHALL BE CORRECTED BY THE PERMIT HOLDER WITHIN THIRTY (30) DAYS NOTICE, OR IT SHALL BE CORRECTED BY COUNTY FORCES AT THE PERMIT HOLDER'S EXPENSE.
8. THE COUNTY RESERVES THE RIGHT TO REQUIRE THE REMOVAL OR REPLACEMENT OF ANY UTILITY LINE IF THE COUNTY DECIDES THAT IT IS IN THE BEST INTEREST OF THE COUNTY.

NATURAL RESOURCE NOTES

1. CONTRACTOR TO COORDINATE WORK IN SPECIAL MANAGEMENT AREAS (SMAs) WITH THE PROPER AUTHORITY. WORK IN TYPE 1 SMAs MUST BE COORDINATED WITH THE OREGON DEPARTMENT OF AGRICULTURE OR US FISH AND WILDLIFE SERVICE. WORK IN TYPE 2 SMAs MUST BE COORDINATED WITH BENTON COUNTY. ANY UNAUTHORIZED DAMAGE TO SMAs SHALL BE RESTORED OR MITIGATED AT THE CONTRATORS EXPENSE.
2. THE APPLICANT SHALL COMPLY WITH ALL LOCAL, STATE AND FEDERAL LAWS, INCLUDING BUT NOT LIMITED TO, THE FEDERAL AND STATE ENDANGERED SPECIES ACT, FEDERAL AND STATE WETLAND LAWS, AND SHALL BE RESPONSIBLE FOR OBTAINING ANY REQUIRED APPROVALS FROM FEDERAL AND/OR STATE REGULATORY AGENCIES.
3. GROUND DISTURBANCES GREATER THAN 1/4 ACRE OUTSIDE OF CITY LIMITS REQUIRES A BENTON COUNTY EROSION CONTROL PERMIT, IF PROJECT IS WITHIN CITY LIMITS PERMITEE RESPONSIBLE FOR COMPLYING WITH CITY EROSION CONTROL REQUIREMENTS.

PAVEMENTS

ALL AC CUTS OR REPAIRS SHALL HAVE HARD SURFACE REPAIRS MADE ON A DAILY BASIS, PRIOR TO REMOVAL OF TEMPORARY TRAFFIC OR THE CUT SHALL BE SURFACED WITH A MINIMUM OF ONE (1) INCH OF COLD MIX ASPHALT UNTIL PERMANENT AC REPAIRS ARE COMPLETED IN ACCORDANCE WITH THE STANDARD DETAIL. APPROPRIATE SIGNING MUST REMAIN UNTIL PERMANENT REPAIRS ARE COMPLETED AND ARE THE RESPONSIBILITY OF THE CONTRACTOR.

ALL PAVEMENT MARKINGS REMOVED DURING REPAIR OR CONSTRUCTION SHALL BE REPLACED BY PERMIT HOLDER IMMEDIATELY UPON COMPLETION OF THE PROJECT. ALL LANE MARKINGS, WHICH ARE REMOVED, MUST BE REPLACED DAILY WITH STRIPING TAPE OR OTHER ACCEPTABLE DELINEATION DEVICES UNTIL PERMANENT MARKINGS ARE PLACED. MAINTENANCE OF ALL TEMPORARY MARKING IS THE RESPONSIBILITY OF THE PERMIT HOLDER.

CONTRACTOR TO RESTORE ANY PAVEMENT CUTS PER THE ATTACHED BENTON COUNTY PAVEMENT RESTORATION, TRENCH BACKFILL & PIPE ZONE DETAIL.

INSURANCE / INDEMNITY

THE APPLICANT SHALL BE LIABLE AND HOLD THE COUNTY HARMLESS FOR ANY LIABILITY FOR ALL ACCIDENTS, DAMAGE OR INJURY TO ANY PERSON OR PROPERTY RESULTING FROM THE CONSTRUCTION, MAINTENANCE, REPAIR, OPERATION OR USE OF SAID UTILITY. THE APPLICANT SHALL CARRY INSURANCE IN THE AMOUNTS SPECIFIED ON EXHIBIT "A" AND NAME BENTON COUNTY AS AN ADDITIONAL INSURED. ANNUAL RENEWAL WILL BE REQUIRED.

CONTRACTOR WORKING IN THE RIGHT OF WAY

ANY CONTRACTOR WORKING IN THE RIGHT OF WAY OF A COUNTY OR PUBLIC RIGHT OF WAY SHALL HAVE A COMPETENT AND RESPONSIBLE PERSON VERIFY IN WRITING TO THIS OFFICE THAT NO SURVEY MONUMENTS WILL BE DESTROYED OR DISTURBED. THE PERSON SHALL REVIEW ALL OF THE RECORDS IN THE COUNTY SURVEYOR'S OFFICE AND OTHER LOCATIONS AND MAKE A THOROUGH FIELD SEARCH FOR ANY MONUMENTS THAT MAY BE SUBJECT TO REMOVAL OR DESTRUCTION. IF ANY SUCH MONUMENT(S) IS (ARE) IDENTIFIED, A COMPETENT LAND SURVEYOR SHALL REFERENCE AND REPLACE THOSE MONUMENTS. OREGON REVISED STATUTES 209.150 STATES "ANY PERSON OR PUBLIC AGENCY REMOVING, DISTURBING OR DESTROYING ANY SURVEY MONUMENT RECORDED IN THE OFFICE OF THE COUNTY SURVEYOR OR COUNTY CLERK SHALL CAUSE A REGISTERED PROFESSIONAL LAND SURVEYOR TO REFERENCE AND REPLACE THE MONUMENT WITHIN 90 DAYS OF THE REMOVAL, DISTURBANCE OR DESTRUCTION."

EXHIBIT A – CERTIFICATION OF INSURANCE REQUIREMENTS

Contractor shall at all times maintain in force at Contractor’s expense for insurance noted below.

Workers’ Compensation insurance in compliance with ORS 656.017, which requires subject employers to provide workers’ compensation coverage in accordance with ORS Chapter 656 or CCB (Construction Contractors Board) for all subject workers. Contractor and all subcontractors of Contractor with one or more employees must have this insurance unless exempt under ORS 656.027. **Employer’s Liability Insurance with coverage limits of not less than \$1,000,000 must be included. THIS COVERAGE IS REQUIRED.** If Contractor does not have coverage, and claims to be exempt, Contractor must indicate exemption within their Bid/Proposal submittal letter with qualified reasons for exemption, see ORS 656.027. Out-of-state Contractors with one or more employees working in Oregon in relation to this contract must have Workers’ Compensation coverage from a state with extraterritorial reciprocity, or they must obtain Oregon specific Workers’ Compensation coverage ORS 656.126.

Professional Liability insurance covering any damages caused by error, omission or any negligent acts of the Contractor, its subcontractors, agents, officers, or employees’ performance under this Contract. **Combined single limit per occurrence shall not be less than \$2,000,000. Annual aggregate limit shall not be less than \$2,000,000.**

- If this box is checked, the limits shall be \$1,000,000 per occurrence and \$1,000,000 in annual aggregate.
- Required by County Not Required by County

Commercial General Liability insurance with coverage satisfactory to the County on an occurrence basis. **Combined single limit shall not be less than \$2,000,000 per occurrence for Bodily Injury and Property Damage and annual aggregate limit for each shall not be less than \$2,000,000.** Coverage may be written in combination with Automobile Liability Insurance (with separate limits). **Annual aggregate must be on a “per project basis”.**

- If this box is checked, the limits shall be \$1,000,000 per occurrence and \$2,000,000 in annual aggregate.
- If this box is checked, the limits shall be \$5,000,000 per occurrence and \$5,000,000 in annual aggregate.
- Required by County Not Required by County

Automobile Liability covering all owned, non-owned, or hired vehicles. If there are no owned autos this coverage may be written in combination with the Commercial General Liability Insurance (with separate limits). **Combined single limit per accident shall not be less than \$2,000,000.**

- If this box is checked, the limits shall be \$1,000,000 per accident.
- If this box is checked, the limits shall be \$5,000,000 per accident.
- Required by County Not Required by County

Property of Others in Transit (Cargo) covering all County owned property / equipment being hauled by contractor. **Limit per occurrence shall not be less than \$100,000.**

- Required by County Not Required by County

Coverage must be provided by an insurance company authorized to do business in Oregon or rated by A.M. Best’s Insurance Rating of no less than A-VII or County approval. Contractor’s coverage will be primary in the event of loss. Contractor shall furnish a current Certificate of Insurance to the County. Contractor is also responsible to provide renewal Certificates of Insurance upon expiration of any of the required insurance coverage.

Contractor shall immediately notify the County of any change in insurance coverage. The certificate shall also state the deductible or retention level. The County must be listed as an Additional Insured by endorsement of any General Liability Policy on a primary and non-contributory basis. Such coverage will specifically include products and completed operations coverage.

The Certificate shall state the following in the description of operations: “Additional Insured Form (include the number) attached. The form is subject to policy terms, conditions and exclusions”. A copy of the additional insured endorsement shall be attached to the certificate of insurance. If requested complete copies of insurance policies shall be provided to the County.

Certificate holder should be: Benton County 360 SW Avery Avenue, Corvallis OR 97333 . Certificates of Insurance can be faxed to 541-766-6891 or emailed to Public Works to: ian.mcguire@bentoncountyor.gov

Contractor’s Acceptance: _____

Completed at County by: Vance M. Croney