



City of Baker City, Oregon
Public Works Department

P.O. Box 650
Baker City, OR 97814-0650
541-523-6541 Voice/TDD

APPLICATION TO WORK IN CITY RIGHT-OF-WAY

Date: _____ Applicant Phone No.: _____ Applicant Fax No.: _____

We request City approval to complete work within the City right of way as shown on the sketch below.

Street address of work: _____

Description of work: _____

Please allow two (2) working days before beginning construction, except in emergency conditions.

Project Start Date: _____

Project Start Time: _____

Project End Date: _____

Project End Time: _____

Applicant Signature: _____

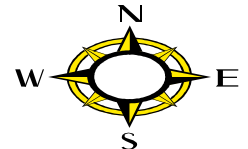
Company Name: _____

Applicant Name: _____

Company Address: _____

SKETCH

**Please Draw
Sketch to Show
North According to
Arrow Below**



EXCAVATION REGULATIONS

Excavator for this project must comply with the provisions of ORS 757.541 to 757.571

Applicant shall notify all utilities prior to excavation.
Oregon Utility Notification Center - Call 811

Return application to:

Public Works Department
City of Baker City
1655 1st Street
Baker City, OR 97814
Phone 541.524.2037
Fax 541.524.2029
Email locates@bakercity.gov

City Use Only	
Approved:	Yes <input type="checkbox"/> No <input type="checkbox"/>
<i>If approved, this permit is only valid for 6 months from the date of approval.</i>	
By:	_____
Title:	_____
Date:	_____

Remarks:
