

EXCAVATION APPLICATION

Missoula County Department of Public Works
6089 Training Drive, Missoula, MT Phone: 258-4753 Fax: 258-4864

This application requests permission to excavate within the Public Right of Way. The proposed excavation is described as shown on the attached plan maximum size 11x17 and is hereby made part of this application. The fee for an excavation permit and inspection is \$90.00

Applicant _____ Work Phone _____
E-Mail _____ FAX Number _____
Contractor _____ Work Phone _____
Address _____ Cell Phone _____
City _____ State _____ Zip Code _____
Excavation Bond Issuer _____ Bond Amount _____ Type _____
Estimated Cost For Activity Within Right-of-Way _____
Utility Locate Number, Job Number, Work Order Number _____
Excavation Date _____
Excavation Location _____
Excavation Length _____ Width _____ Depth _____
Purpose of Excavation _____
Further Description _____
Type of Surface _____

Traffic Control Plan Needed? Yes _____ No _____ Other _____
If yes, an adequate traffic control plan shall be submitted prior to starting work for review and approval by the Missoula County Transportation Engineer.

Asphalt Surface, Millings Less Than Two Years Old? Yes _____ No _____ Other _____
If yes, an additional assessment of \$5.00 per square foot of pavement removed will be made.

Excavation Through An Existing Intersection? Yes _____ No _____ Other _____
If yes, contact the Missoula County Surveyors Division to determine if the intersection monuments will require protection or referencing: Phone 406-258-4870.

Missoula County Weed District and Missoula County Public Works Department Revegetation.
Contact William J.Otten, Weed Prevention Coordinator, Missoula County Weed District, 2825 Santa Fe Court, Missoula, Montana 59808, Phone 406-258-4218, Fax 406-258-3916

Excavation Completion Date _____

Notice shall be given a minimum of twenty-four (24) hours prior to construction. The permittee hereby agrees to perform all work under this application in strict compliance with the Missoula County Public Works Manual.

Applicant Signature _____ Date _____

CALL UULC 1-800-424-5555 BEFORE YOU DIG