



Development Services Division  
 620 SE Madison, Unit 6  
 Topeka, Ks, 66607  
 Phone: (785) 368-3704  
 Fax: (785) 368-1650

## EXCAVATION PERMIT APPLICATION

DATE: \_\_\_\_\_

Development Services – Application #: \_\_\_\_\_ Permit fee: \$ \_\_\_\_\_

The undersigned hereby requests permission to perform the work herein described and hereby agrees to perform said work in strict accordance with all applicable codes, standards, rules, regulations, ordinances and specifications of the City of Topeka, Kansas. Permission is hereby granted to the signed party to perform the work as requested and agreed herein.

PERMIT NAME (COMPANY, and/or for which COMPANY)

CONTACT PERSON (Please Print) \_\_\_\_\_ Signature \_\_\_\_\_ Date \_\_\_\_\_

PHONE # \_\_\_\_\_ FAX # \_\_\_\_\_

### APPLICANTS PLEASE COMPLETE THE FOLLOWING:

Address of excavation: \_\_\_\_\_

Generally located: \_\_\_\_\_

### Excavation work will be located in the:

Street \_\_\_ Alley \_\_\_ Easement \_\_\_ City Parking \_\_\_ Curb \_\_\_

### Type of work will be:

Directional Boring \_\_\_ Open Trench \_\_\_

### The purpose of the excavation is for:

Public sewer \_\_\_ Private sewer \_\_\_ Public water main \_\_\_ Private water service \_\_\_

Gas line \_\_\_ Electric line \_\_\_ Drainage \_\_\_ Telephone \_\_\_ Cable TV \_\_\_

Other \_\_\_\_\_

### The work will be for:

New \_\_\_ Repair \_\_\_ Replacement \_\_\_ Abandonment \_\_\_ of the Main \_\_\_ or Service \_\_\_

Excavation area will be approximately \_\_\_\_\_ feet long \_\_\_\_\_ feet wide & \_\_\_\_\_ feet deep

Requested working time for project is \_\_\_\_\_ days. Beginning on: \_\_\_\_\_