ENCROACHMENT PERMIT - APPLICATION PROCESS

Step 1 - Planning Phase

☐ Submit Application & Construction Plans
☐ Obtain Encroachment Permit from Road Department
☐ Sign Conditions / Guarantee
☐ Review attached Detail / Specifications

Note: If project changes, and asphalt must be disturbed, STOP! Submit in writing, a request to modify permit, include explanation for asphalt disturbance. Authorization must be obtained prior to asphalt disturbance.

Step 2 - Construction Process

☐ Provide "Safe Work Zone" per MUTCD
☐ Material/Compaction Test - Subgrade (Inspection)
☐ Material/Compaction Test - Base (Inspection)
☐ Prime Coat (Orange Book) verified by Road Dept.
☐ Material/Compaction Test - Asphalt (Inspection)
☐ Fog Seal Applied (Orange Book)

Step 3 - Final Construction Inspection

☐ Call for Final Construction Inspection
(775) 423-4133
CHURCHILL COUNTY ROAD DEPARTMENT
330 N. Broadway Street
Fallon, Nevada 89406
(775) 423-4133
(775) 423-7285 Fax

Permit Fee: ___________
Deposit: ___________
Receipt No. ___________

ENCROACHMENT APPLICATION - PERMIT

Applicant: __________________________

Subject Property Address: __________________________

Project Start Date: ___________ Projected Completion Date: ___________

Purpose / Nature of Work: __________________________

* Attach detailed plans, including all existing rights-of-way, limits of existing improvements, and the location of work being done.

Full description of the type and scope of work: __________________________

Will any asphalt surfaces be disturbed, if so please describe: __________________________

* * * * *

By signing below, the permittee hereby accepts any, and all conditions imposed by Churchill County herein, unless he notifies Churchill County, in writing, of his specific objections prior to commencing any construction hereunder. The permittee also agrees to comply with the standards and specifications as outlined in Churchill County Code 12.04.140. It is the responsibility of the permittee to contact the Road Department and arrange for inspections.

Signature of Permittee or Authorized Agent __________________________
Print Name and Title __________________________

Address __________________________ City __________________________ State ___ Zip ___

Telephone: __________________________ Mobile: __________________________ Fax: __________________________

Copy of Insurance must be provided __________________________

Permit granted this _____ day of _____________, 2023 (subject to attached conditions, if any).

Permit Approved By: __________________________ Churchill County Road Department

Final Inspection Completed By: __________________________ Date: _____________

Approved for Closure: Y N Authorize Full Deposit Release: Y N

Comments: __________________________

A COPY OF THIS PERMIT MUST BE AVAILABLE AT THE JOB SITE