



Eriks Ludins, ROW Manager
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 ROW Division - Permits
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Right-of-Way CITY PLAN REVIEW Submittal Form
 (this is **NOT** a PERMIT Application)

- 1) Submit Application Form & Engineer Grade 'D' Drawings in PDF format to PW-ROWplan-review@ci.stpaul.mn.us only.
- 2) Each page of Excavation Plans Shall Be **Signed** by a Minnesota Certified Civil Engineer.
- 3) When Approved, an Approval Letter and if needed, a Review List with Conditions will be emailed to the Applicant.
- 4) Following PLAN Approval, you may request a ROW PERMIT. Refer to the **PLAN NUMBER** assigned when requesting a permit. (please print & check items affected) **Do Not Combine Excavations & Obstructions** on the same application, **Submit Separately**

ALL APPLICANTS MUST BE REGISTERED WITH THE ROW DIVISION PRIOR TO PLAN or PERMIT APPROVAL

Applicants Name: _____ Phone Number: _____ Cell Number: _____
 Email Address: _____
 Designer Name: _____ Phone Number: _____ Cell Number: _____
 Email Address: _____
 Utility Co Name: _____ Phone Number: _____ Fax Number: _____
 Billing Address: _____ City: _____ State: _____ Zip: _____

Company Job/Project/ID Number: _____

PLAN TYPE: Excavation (Buried Work) **OR** Obstruction (Aerial, Pulling in Existing Ducts)

DESCRIPTION OF WORK: _____

Describe Project: **Bore** 500' of Duct & Fiber On X St-Y St to Z St, or **Place** 1000' of Aerial Cable in alley N of M St-N St to O St, or **Install** (3) poles on A St, or **Pull** 100' of Fiber in existing conduit ACR State St-Fillmore to Plato for Service at 10 River Park Plaza.
 (What work is being done, Linear Ft or Qty, and Where is it being done)

LOCATION:

Address _____ **From Street** _____ **To Street** _____
 or **Cross St** _____ or **Corner (NWC, SWC, etc)** _____

EXCAVATION INFORMATION (Mark all that apply):

Excavation: **Linear Length** (ft) In ROW _____

Installation: Poles Conduit Fiber Metallic Cable MH/Hand Holes Small Cell on New Pole

Placement Method: Directional Bore Open Trench Saw Cut Dig

OBSTRUCTION INFORMATION (Mark all that apply):

Obstruction: **Linear Length** (ft) in ROW _____

Pull thru Existing Ducts Aerial Placement: New or Over-Lash

FORECAST CONSTRUCTION SCHEDULE: Start Date: _____ Complete Date: _____

By signing this application, I (the applicant/company) hereby acknowledge that I must adhere to all provisions of City of Saint Paul Ordinance Numbers 116, 135 and any other applicable ordinances. The applicant shall also comply with the regulations of all other governmental agencies for the protection of the public.

APPLICANTS SIGNATURE: _____ **DATE:** _____