

**TALBOT COUNTY ROADS DEPARTMENT
REQUEST TO PERFORM WORK IN TALBOT COUNTY ROAD R-O-W**

SUBCONTRACTOR **RESIDENTIAL** **PROJECT**

DATE _____ PERMIT NO. _____

1. APPLICANT NAME _____

ADDRESS _____

PHONE _____

EMAIL _____

2. COMPANY/INDIVIDUAL PERFORMING WORK _____

ADDRESS _____

PHONE _____

EMAIL _____

3. WORK TO BE DONE _____

4. DATE WORK WILL BEGIN _____

5. LOCATION OF WORK TO BE DONE _____

Driveway Utility Work Other Within County ROW Outside County ROW

6. MISS UTILITY LOCATE # _____ DATE _____

7. MHIC AND/OR BUSINESS LICENSE OF SUBCONTRACTOR (if applicable) # _____

EXP DATE _____

8. INSURANCE COMPANY NAME: _____ PHONE NO. _____

9. DIRECT SUPERVISOR PHONE CELL _____ OFFICE _____

10. PERMIT # _____ AND/OR P.O. # _____ FROM GENERAL CONTRACTORS
TO SUBCONTRACTOR

11. LIST ANY ATTACHED DOCUMENTS WITH THIS REQUEST

12. SUBMIT TRAFFIC PLAN IF NECESSARY YES NO

13. SUBMIT EMERGENCY PLAN IF REQUIRED YES NO

ALL WORK SHALL BE PERFORMED IN ACCORDANCE WITH APPLICABLE LAWS, REGULATIONS, SPECIFICATIONS AND REQUIREMENTS AND TO THE SATISFACTION OF THE TALBOT COUNTY ROADS DEPARTMENT. PERMITTEE IS RESPONSIBLE FOR ANY DAMAGE TO COUNTY ROADS AND THE ROAD IS TO BE RETURNED TO ITS ORIGINAL CONDITION. PERMITTEE IS RESPONSIBLE FOR OBTAINING ALL NECESSARY PERMITS AND/OR APPROVALS, INCLUDING, BUT NOT LIMITED TO, TALBOT COUNTY GRADING PERMIT, SOIL CONSERVATION EROSION AND SEDIMENT CONTROL PERMITS, MISS UTILITY OF DELMARVA, ETC. PERMITTEE SHALL NOTIFY THE TALBOT COUNTY ROADS DEPARTMENT WHEN WORK IS TO BEGIN, WHEN WORK IS TO BE INSPECTED, AND WHEN THE WORK IS COMPLETE. PERMITTEE SHALL PROVIDE THE TALBOT COUNTY ROADS DEPARTMENT WITH A WORKING PHONE NUMBER OF A CONTACT PERSON WHO SHALL REMAIN AVAILABLE FOR COMMUNICATION UNTIL THE WORK HAS BEEN INSPECTED, APPROVED AND ACCEPTED. ALL WORK MUST BE DONE DURING REGULAR WORKING HOURS UNLESS OTHERWISE APPROVED BY THE TALBOT COUNTY ROADS SUPERINTENDENT. ALL WORK MUST BE INSPECTED, AND APPLICANT/CONTRACTOR WILL BE RESPONSIBLE FOR ALL REPAIRS CAUSED BY DEFECTIVE WORK WITHIN 60 TO 180 DAYS, WHETHER BEFORE OR AFTER ACCEPTANCE BY THE COUNTY. TRAFFIC MUST BE MAINTAINED AT ALL TIMES AS PER MARYLAND STATE HIGHWAY ADMINISTRATION STANDARDS.

INSPECTION FEE (CONTRACTOR): \$50/INSPECTION OR ZONE PER PERMIT

CASH **CHECK NO.** _____ **WAIVED**

APPROVED _____ DATE _____

COUNTY USE ONLY

Application Approved: _____ Date: _____

Commencement Date: _____

Completion Date: _____

Inspection Date: _____

Inspection Approved: _____ Disapproved: _____

Comments: _____

NOTES/DRAWINGS: