

LIVONIA TOWNSHIP  
PO BOX 388  
ZIMMERMAN, MN 55398  
PHONE 763 856 5640 FAX 763 856 5642

For Office Use Only

Permit # \_\_\_\_\_

**APPLICATION AND AGREEMENT FOR EXCAVATION AND/OR OBSTRUCTION  
PERMIT UNDER ORDINANCE # 600**

Application is hereby made for permission to place, excavate, or obstruct the right-of-way with a  
\_\_\_\_\_ (along or across) Livonia Township Road (property address)  
\_\_\_\_\_ **in accordance with the sketch attached hereto.**

Business/Contractor Name: \_\_\_\_\_

Applicant: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Email: \_\_\_\_\_

**Contact Person:** \_\_\_\_\_ **Telephone #** \_\_\_\_\_

**Email:** \_\_\_\_\_

Certificate of Insurance Provided to Livonia Township: From \_\_\_\_\_ to \_\_\_\_\_  
(Dates of coverage)

**Construction Location** (describe):

\_\_\_\_\_  
\_\_\_\_\_

From/to: (Address/Intersection) \_\_\_\_\_

**Purpose/Type of Construction** (check all that apply)

New \_\_\_\_\_ Replacement \_\_\_\_\_ Repair \_\_\_\_\_ Other \_\_\_\_\_

Trench \_\_\_\_\_ Hole \_\_\_\_\_ Chamber \_\_\_\_\_ Boring \_\_\_\_\_

Other \_\_\_\_\_

Excavation Size: Length \_\_\_\_\_ Width \_\_\_\_\_ Depth \_\_\_\_\_

**Construction Schedule**

Number of Construction Days: \_\_\_\_\_ Construction Dates: \_\_\_\_\_

Applicant acknowledges receipt of and is familiar with the provisions of Ordinance 600. Applicant agrees to return Township Right-of-Way to original condition when project is complete.

Signed: \_\_\_\_\_ Name (Print) \_\_\_\_\_

Date: \_\_\_\_\_

**COMPLETE & RETURN A COPY OF PERMIT AFTER PROJECT COMPLETION**

Permit Number: \_\_\_\_\_

Send to: Livonia Township

Date Completed: \_\_\_\_\_

PO Box 388

Zimmerman, MN 55398

Name of Applicant: \_\_\_\_\_