



City of Wentzville  
Public Works Department  
1001 Schroeder Creek Blvd  
Wentzville, MO 63385  
636-639-2045

## Application For Right-of-Way Permits

**LOCATION OF PROJECT:**  
(Street Address or Intersecting Street)

<b>UTILITY COMPANY / OWNER</b>				
COMPANY	CONTACT			PHONE
				EMAIL
ADDRESS	STREET	CITY	STATE	ZIP CODE

<b>CONTRACTOR</b>				
COMPANY	CONTACT			PHONE
				EMAIL
ADDRESS	STREET	CITY	STATE	ZIP CODE

<b>SUBCONTRACTOR (Provide Separate Sheets for Multiple)</b>				
COMPANY	CONTACT			PHONE
				EMAIL
ADDRESS	STREET	CITY	STATE	ZIP CODE

<b>EMERGENCY 24/7 CONTACT</b>				
NAME				PHONE
				EMAIL

**PROJECT INFORMATION**

**TYPE OF WORK TO BE UNDERTAKEN (CHECK ALL THAT APPLY):**

<input type="checkbox"/> OPEN EXCAVATION	<input type="checkbox"/> POLE RELOCATION / INSTALLATION
<input type="checkbox"/> HORIZONTAL BORING	<input type="checkbox"/> EMERGENCY
<input type="checkbox"/> PNEUMATIC (MISSILE) BORING	<input type="checkbox"/> OTHER

LINEAR FEET OF EXCAVATION:  
LINEAR FEET OF PNEUMATIC (MISSILE) BORING:

**SCHEDULE:**  
START DATE (MM/DD/YYYY): \_\_\_\_\_ DAYS REQUIRED TO COMPLETE: \_\_\_\_\_

**ATTACHMENTS (CHECK ALL THAT APPLY):**

<input type="checkbox"/> DETAILED PLANS FOR UTILITY WORK
<input type="checkbox"/> TRAFFIC CONTROL PLAN
<input type="checkbox"/> OTHER _____

ARE THERE OTHER UTILITIES BEING INSTALLED IN SAME LOCATION? **YES** **NO**  
LIST OTHER KNOWN UTILITIES BEING INSTALLED:

PERMITEE: NAME AND OFFICIAL TITLE (TYPE OR PRINT)	PHONE NO.
SIGNATURE	DATE SIGNED