



PUBLIC WORKS & MOBILITY

Utility Permit Application

Property Information

ADDRESS _____

If the location does not have a specific address, reference the street, lot, phase of project, or nearby address.

Applicant and Contact Information

Excavator Business Name _____

Competent Person _____

ACI Required for concrete work _____

Preferred Contact Phone or Email _____

WORK DETAILS *Select and provide all that apply.*

Locate Number _____

Traffic Control Plan _____

Traffic Control Start _____

Traffic Control End Date _____

A Traffic Control Plan is required for Street, Alley, and ROW Out of Asphalt Work Zones. Provide TC number, describe, or attach plan.

Permit Type *Select all that apply.*

Sanitary Sewer Service	Water Service	Dry Utilities
<input type="checkbox"/> Related to Building Permit, record: 20__-MSS-SWR-_____	<input type="checkbox"/> Related to Building Permit, record: 20__-MSS-WTR-_____	<input type="checkbox"/> Gas
<input type="checkbox"/> New Gravity Service Stub to Building	<input type="checkbox"/> New Service Stub to Building	<input type="checkbox"/> Buried Cable
<input type="checkbox"/> New Step Service Stub to Building*	<input type="checkbox"/> New Service Main to Building	<input type="checkbox"/> Joint Trench Utility
<input type="checkbox"/> New Gravity Service Main to Building	<input type="checkbox"/> New Stub	<input type="checkbox"/> New Main
<input type="checkbox"/> New Step Service Main to Building*	<input type="checkbox"/> Repair Service	<input type="checkbox"/> New Service
<input type="checkbox"/> Solids Interceptor	<input type="checkbox"/> Fire Line Service Stub to Building	<input type="checkbox"/> Repair
<input type="checkbox"/> Grease Interceptor	<input type="checkbox"/> Fire Line Service Main to Building	Excavation
<input type="checkbox"/> Sand/Oil Interceptor	<input type="checkbox"/> Other _____	<input type="checkbox"/> New Sewer Main***
<input type="checkbox"/> Neutralization Tank	Storm Water	<input type="checkbox"/> New Water Main***
<input type="checkbox"/> New Stub	<input type="checkbox"/> New Service Connection	<input type="checkbox"/> New Storm Main***
<input type="checkbox"/> New Step Stub	<input type="checkbox"/> Repair Service	<input type="checkbox"/> Repair Sewer Main
<input type="checkbox"/> Repair Service	<input type="checkbox"/> Sump/Drywell** - QTY _____	<input type="checkbox"/> Repair Water Main
<input type="checkbox"/> Other _____	<i>**Attach Dry Well Approval form.</i>	<input type="checkbox"/> Repair Storm Main
<i>*Attach Step Easement (required).</i>		<input type="checkbox"/> Hydrant
		<i>***Provide City Project Number below.</i>

CITY PROJECT NUMBER: _____ *Attach quantities sheet. Submit one application for project.*

SURFACE TYPE	WORK ZONE <i>Additional Requirements Noted</i>
<input type="checkbox"/> Concrete	<input type="checkbox"/> Street
<input type="checkbox"/> Gravel	<input type="checkbox"/> Alley
<input type="checkbox"/> Dirt	<input type="checkbox"/> Private Property
<input type="checkbox"/> Other: _____	<input type="checkbox"/> ROW Out of Asphalt
<input type="checkbox"/> Asphalt LENGTH in Feet: _____	<input type="checkbox"/> ROW State <i>Attach - MDT Permit Required</i>
<i>Asphalt square footage is calculated as length provided by width of 8' for excavation permit and 6' for service permit. Fees assessed based on GIS roadways map.</i>	<input type="checkbox"/> ROW County <i>Attach - County Exc Permit Required</i>
	<input type="checkbox"/> Easement – Public Utility
	<input type="checkbox"/> Easement – Private Utility

Submit completed applications by selecting the button (right) if you are online or email coordinators@ci.missoula.mt.us. Attach all required documents to the email. Alternatively, you can drop off or mail to CPDI in City Hall at 435 Ryman St. Missoula, MT

Submit Permit Application