Public Works Department
Application for Encroachment Permit

City of Dallas
187 SE Court Street
Dallas, Oregon 97338-3117
Ph: 503-623-2338
Fax: 503-623-2339

JOB ADDRESS:	DATE:
PERMITTEE:	TELEPHONE: ( )
MAILING ADDRESS:	FAX: ( )
	STATE LICENSE #:
CONTRACTOR:	TELEPHONE: ( )
ADDRESS:	EMERGENCY TELEPHONE: ( )
APPROXIMATE STARTING DATE:	APPROXIMATE COMPLETION DATE:

DESCRIPTION OF WORK:

PERMIT FEE SCHEDULE:

Non-Construction Items **$25**
(includes materials storage within right-of-way, debris box, & temporary road or sidewalk closures)

Construction Items:

$0 to $1,500 valuation	**$50**
$1,500 to $50,000 valuation	**$50 plus 3% value** over $1,500
over $50,000 valuation	**$1,500 plus 2% value** over $50,000

TOTAL VALUATION: _____
(Note: Valuation is based upon approved engineer's estimate.)

TOTAL PERMIT FEE:

NOTES

1. Inspections may be requested by notifying the Public Works Department at 503-831-3562. Twenty-four (24) hours notice is required in order to schedule inspection.
2. Any person, firm, or corporation encroaching into the public right-of-way to do work, store materials, erect or place any structure is required to obtain an Encroachment Permit when such activity is covered under Dallas City Code Section 5.402.

Date: Approved By: Permit Number:

CERTIFICATE OF INSURANCE AND LICENSE COMPLIANCE

DIRECTIONS: Place an "X" next to the appropriate statement under both the Worker's Compensation section and the Contractor's Licensing section below. Fill in any blanks in the statement where your "X" is. Sign and date this form after you have read everything on it.

WORKER'S COMPENSATION (ORS 656)

- ☐ 1. a. I have attached a certificate of insurance which shows that I carry Worker's Compensation Insurance for work to be done under this permit.
- ☐ b. I have on file with the Dallas Public Works Department a certificate of insurance as described in (a) above.
- ☐ 2. I have attached a certificate of consent to self-insure issued by the State of Oregon Workers Compensation Division
- ☐ 3. I certify that in the performance of the work for which this permit is issued I shall not employ any person in any manner so as to become subject to the worker's compensation laws of Oregon.

COMPREHENSIVE GENERAL AND AUTO LIABILITY

- ☐ 1. a. I have attached a certificate of insurance which shows that I carry General and Auto Liability ($1,000,000 minimum each for Person Injury and Property Damage), for work to be done under this permit. The above named certificate of insurance shall name the City of Dallas as an additional insured.
- ☐ b. I have on file with the Dallas Public Works Department a certificate of insurance as described in (a) above.
- ☐ 2. As a public utility agency, we are exempt or self-insured

CONTRACTOR'S LICENSING (ORS 701)

- ☐ 1. As the applicant, I am licensed under the provisions of the Contractor's License Law. My license number, _____ in classification__ _____ is in full force and effect.
- ☐ 2. I am exempt from the "License Required" provisions of the Contractor's License Law, State basis of exemption:_____ _____

I understand that this permit is revocable at any time when I am required to follow the conditions stated herein but do not. I agree to indemnify and hold harmless the City of Dallas against liabilities, judgements, costs, and expenses which may in any way accrue against said City in consequence of granting this permit.

Signature of Applicant/Contractor:_____ Date:_____