LAURENS COUNTY
GEORGIA

LAURENS COUNTY

BOARD OF COMMISSIONERS

Application and Permit for Utility Facilities / Right-of Way Encroachment

Application is hereby made to Laurens County by:

Utility Name: _____

Utility Address: _____

_____

Utility Contact Person: _____

Utility Contact numbers: _____

Utility Contact email: _____

Description of Encroachment Area

County Road for permit: _____

County Road Number: _____

Please describe in best details the exact location of the said road that the encroachment will occur: _____

Encroachment Purpose: _____

Estimated Start Date of Encroachment: _____

End Date of Encroachment if applicable: _____

Laurens County

The Utility Facilities / Right-of Way Encroachment covered in this application shall be governed in accordance with with Georgia Department of Transportation Guidelines. Inspection of encroachment shall be conducted by an appointed employee of the Board of Commissioners to assure that such encroachment is in accordance with above mentioned guidelines, policies and practices. Building Plans and/or Plans of Action shall be attached to this application at the moment of submission and shall be incorporated hereto. Failure to adhere to any part of this agreement will void this agreement and damages may be pursued by the Laurens County Borad of commissioners.

Utility Facilities / Right-of Way Encroachment Permit requested this:

_____ day of _____, 20_____

By: _____ (please print)

_____ (signature)

_____ (title or position)

Witness: _____ (please print)

_____ (signature)

____ Permission is granted for the above-described Utility Facilities / Right-of Way Encroachment in accordance with the Building Plans and/or Plans of Action and provision hereof. This permit is to be strictly constructed and no work other than that specifically described above is hereby authorized.

Permit Granted this _____ day of _____, 20____

Authorized by: _____

☐ Permission is denied for the above-described Utility Facilities / Right-of Way Encroachment based on the following reasoning:

_____

Denied this _____ day of _____. 20

Authorized by: _____

Laurens County