

# Street Work Permit Application

PERMIT# \_\_\_\_\_

MC# \_\_\_\_\_



Dispatch Centre  
1399 Franklin St., North Bay, ON  
Tel. (705) 474-4340  
Fax (705) 474-3996

[PublicWorksDispatch@northbay.ca](mailto:PublicWorksDispatch@northbay.ca)

ACTIVITY LOCATION			
Street Name _____	Mun. No. _____	Lot No. _____	or Landmark _____
Between _____		And _____	
Work is to be carried out by:		Applicant _____ Other (If other please specify company, site contact with Phone #) _____	
<b>Name and Phone Number (2 mandatory):</b>			
After Hour Contact 1: _____		After Hour Contact 2: _____	
<b>Work Schedule:</b> Is scheduled to start on _____ at _____ hrs and will be reopened _____ at _____ hrs.			
<b>Excavation:</b> Yes _____ N/A _____			
<input type="checkbox"/> Roadway excavation is _____ m long and _____ m wide at a depth of _____ m Surface Type: _____ <input type="checkbox"/> Sidewalk excavation is _____ m long and _____ m wide at a depth of _____ m Surface Type: _____ <input type="checkbox"/> Boulevard excavation _____ m long and _____ m wide at a depth of _____ m Surface Type: _____ <input type="checkbox"/> Other (*) excavation is _____ m long and _____ m wide at a depth of _____ m Surface Type: _____ *Other refers to Driveway, landscaped area etc. Please specify surface type _____			
Will restoration be required Yes _____ N/A _____			
Restoration Contractor(s): _____		Approval (CNB Initial): _____	
<b>Traffic Control</b>			
Roadway is to be:	Fully Closed with Detour	Partially Closed; Reduced to _____ Lane(s)	Not Effected
Sidewalk is to be:	Fully Closed with Detour	Partially Closed; Reduced width to _____ m	Not Effected
Please provide a detailed Traffic Control Plan in accordance with the Ontario Traffic Manual (Current Edition) indicating all closure and detour information with the permit application. If a Typical Layout is utilized from OTM Book 7 please specify: TL - _____ All cuts to the City's roads, curb, and sidewalk must be maintained until restored to its original form. Final inspection must be performed by the City for work to be completed.			
<b>Comments:</b>			
<b>Capital Works Comments: (if applicable)</b>			
<b>Company Name and Address:</b> _____			
<b>Site Supervisor:</b> _____			
<b>Phone:</b> _____			
<b>Work CNB Inspection:</b>			
Complete	Incomplete	Acceptable	Unacceptable

Comments: \_\_\_\_\_

**Traffic Control:** Traffic Signing will be in accordance with the current version of **Book 7 of the Ontario Traffic Manual – Temporary Conditions (January 2014)**. Access for emergency vehicles **MUST** be maintained at all times, unless otherwise approved by The Corporation.

**GENERAL CONDITIONS**

1. If for construction, insurance certification to include The Corporation of the City of North Bay as an additional insured, and copy of insurance certification must be submitted.
2. Any person or persons intending to perform work on City of North Bay property must first apply to the Engineering Services Division for a municipal consent letter. This approval must be obtained prior to the commencement of work.
3. The permit must be in the name of the person or persons performing the intended work and not the name of an agent acting for him/her.
4. WSIB Clearance must be submitted by contractors to complete the work.
5. The applicant assumes all maintenance and liability for temporary repairs until such time as permanent repairs are completed for the work described herein.
6. The applicant shall have the permit available at the times during which work is in progress.
7. The permit becomes null and void if the applicant should fail to meet the requirements of the permit, in which case, the Director of Engineering or his/her designate shall take action they deem necessary to reinstate the site for public protection at the expense of the applicant. In all cases the decision of the Director of Engineering is final.
8. When unforeseen circumstances require an extension of the permit or a change in any of the conditions under which the permit was issued, the holder of the permit shall apply for such change at least 24 hours in advance. Failure to do so will render the permit void.
9. All barricades, signs, signals, traffic control person(s), traffic control devices, detour design and signing shall meet current **Ontario Traffic Manual – Book 7 for Temporary Conditions (January 2014)** requirements and shall be the sole responsibility of the applicant.
10. The applicant shall maintain access to all public and private properties for the duration of the work.
11. It shall be the applicant's responsibility to request marking or other location information to determine the location and provide safeguards for all utilities, both public and private, in accordance with current regulations.
12. All damaged, disruption or removal of existing works such as curb, sidewalk etc. as described in the permit, and damages related to the work activity shall be reinstated by the applicant to current City of North Bay Standards. Compaction tests are required if requested by the City.
13. The Applicant shall be responsible for attaining any and all other permissions and permits necessary to perform the permitted work, including those from all applicable federal, provincial, and local government or agencies.
14. Notify: Police 705 497-5555 Fire 705-472-1221 Ambulance 705-474-7403 Public Works Dispatch 705-474-4340
15. Other Specify:

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

**APPLICANT INFORMATION**

APPLICATION SUBMITTED BY:

STREET ADDRESS:

ON BEHALF OF:

BY:

THIS \_\_\_\_\_ DAY OF \_\_\_\_\_

**AGREEMENT**

I, THE UNDERSIGNED HAVE READ AND UNDERSTAND THE INFORMATION PROVIDED AND AGREE TO ABIDE BY ALL GENERAL CONDITIONS, SPECIAL PROVISIONS AND ALL CONDITIONS LISTED ON THE FACE AND BACK OF THIS PERMIT APPLICATION, AND PERMIT IF ISSUED.

Authorized Representative		
	Signature	Date

**PERMISSION GRANTED BY THE CITY OF NORTH BAY THIS \_\_\_\_\_ DAY OF \_\_\_\_\_ IN THE YEAR OF \_\_\_\_\_ .**

\_\_\_\_\_  
 \_\_\_\_\_  
 POSITION

**NOTICE: ALL EXCAVATIONS ON HARD SURFACE ROADS AND SIDEWALKS MUST BE COLD OR HOT ASPHALT/CONCRETE REPAIRED IMMEDIATELY UPON COMPLETION OF THE WORK.**

Submit Permit Application to:  
[PublicWorksDispatch@northbay.ca](mailto:PublicWorksDispatch@northbay.ca)  
[Angela.Russo@northbay.ca](mailto:Angela.Russo@northbay.ca)

*Personal information on this form is collected under the authority of the Municipal Freedom of Information and Protection of Privacy Act and will be used for its intended purpose only. Questions about this collection or personal information should be directed to the City Clerk, 200 McIntyre Street East, North Bay ON P1B 8V6, or by telephone at (705) 474-0626 ext. 2510.*

*By signing and/or submitting this form to the City of North Bay you are acknowledging that your information will be collected, used and stored by the City.*