



APPLICATION FOR TEMPORARY USE OF A RIGHT OF WAY

Department of Transportation Right of Way Permits Section
 401 E. Fayette St, 1st Floor, Suite 101, Baltimore, MD 21202
 410-396-4508 • row.permit.documents@baltimorecity.gov



PLEASE PRINT OR TYPE INFORMATION

SECTION A (Contact Information)	DATE SUBMITTED:
Applicant*	Contractor
Applicant Point of Contact Name	Contractor Point of Contact Name
Applicant Point of Contact Phone	Contractor Point of Contact Phone
Applicant Email Address	Contractor Email Address
Applicant Address, City, State, Zip	Contractor Address, City, State, Zip

*Note that DOT will hold the Applicant listed in this top left box responsible for any and all work performed under this permit. Any violations found by our inspection team will be sent to this individual or organization. Any street, lane or alley closure will require a Traffic Control Plan (TCP). Sidewalk closures may require a Pedestrian Detour Plan. Please include these with your application. Applications should be submitted in PDF format, no larger than 10MB.

Payment must be received prior to releasing a permit. 'NO PARKING' signs must be posted 72 hours prior to the permit start work date.

TYPE OF PERMIT

- | | | | |
|---|--|---|--|
| <input type="checkbox"/> Alley Closure | <input type="checkbox"/> Film Equipment | <input type="checkbox"/> Utility/Street Cut (see Section B) | <input type="checkbox"/> Wire Pull Access |
| <input type="checkbox"/> Curb/Travel Lane | <input type="checkbox"/> Footway /Sidewalk | <input type="checkbox"/> Electric | <input type="checkbox"/> Emergency App under Blanket Permit |
| <input type="checkbox"/> Curb Repair | <input type="checkbox"/> Scaffolding | <input type="checkbox"/> Fiber Optics/ Telephone | <input type="checkbox"/> New Pole/Pole Attachment Permit (see Section B) |
| <input type="checkbox"/> Dumpster | <input type="checkbox"/> Street Closure | <input type="checkbox"/> Gas | <input type="checkbox"/> Other: _____ |
| <input type="checkbox"/> Fence | <input type="checkbox"/> Test Pit | <input type="checkbox"/> Sewer/Water | |
| | | <input type="checkbox"/> Other: _____ | |

Proposed Work Location/Address		Applicant Internal Job/WO#	
Street Name			
From Street	To Street	Councilmanic District Number	
Description of Proposed Work			
Requested Start Date/Time	Requested End Date/Time	Drawing Attached? Yes No	
Parking Meter Id's/No. of Spaces (EZ Park Only)		Related Approvals	
		Developer's Agreement	Right of Entry
		City Contract #	H.C.D. Permit #
		Small Cell Prepaid #	
*For EZ Park meters only, if you are requesting fewer than 10 spaces, the meter will not be bagged. 'NO PARKING' signs will need to be obtained and posted at the location 72 hrs. in advance to reserve spaces.			

CONTINUED ON PAGE 2.



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SECTION B (For Street Cut Work Only)

Lane or Sidewalk Closures?	Yes	No
Will steel plates be used?	Yes	No
Weekend Work?	Yes	No
Night Work?	Yes	No

Number of Street Cuts _____ Number of Sidewalk cuts (including grass area) _____
 Total LF of Street Cuts _____ Total LF of Sidewalk Cuts (including grass area) _____

Please define size of each cut in Additional Comments.

Submit PDF of drawings and site-specific traffic control plan along with this application. Submit construction drawings to street@baltimorecity.gov when job is complete if design is different from original, referencing permit number.

Additional Comments

SECTION C (All Permits)

I declare under penalties of perjury that this application, including any accompanying plans, specifications, etc., has been examined by myself and to the best of my knowledge and belief is a true, correct, and complete statement of the work to be covered by this application.

X _____ X _____ X _____
 Signature (Required) Print Name (Required) Date

When applicable for Utility companies:

Project Number:	Project ID:
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Please submit this application via email to row.permit.documents@baltimorecity.gov in a PDF format.