



City of Shepherdsville Encroachment Permit Application

Permit # _____

Applicant

Contact Person: _____ Company: _____
Address: _____ City: _____ State: _____ Zip: _____
Phone: _____ Email: _____
Business License Number (if applicable): _____

Property Owner:

Name: _____
Address: _____ City: _____ State: _____ Zip: _____
Phone: _____ Email: _____

Project Location

Address: _____ City: _____ State: _____ Zip: _____
Location on Property: _____

Type of Encroachment

(Check all that apply)

Entrance/Curb Cut

- Residential
- Commercial/Business

Utility

- New Overhead
- New underground
- Repair/Maintenance

Building/ Grade Work

- Fill
- Landscape on Right of Way/Easement
- Structure in Right of Way/Easement
- Other _____

Pavement Cut

- Street
- Sidewalk
- Driveway
- Other _____

Encroachment Description:

Note

Please attach a descriptive drawing that shows the encroachment and its relation to any nearby existing utilities and/or structures. Application will not be approved without a drawing. Any work involving cutting a public roadway or sidewalk will also require a \$1,000 bond.

Proposed Start Date: _____

Proposed Completion Date: _____

Restoration Plan Attached? _____

Traffic Control Plan Attached? _____

(I/We) hereby certify that all the information contained in this application is true and complete to the best of my knowledge and (I/We) will comply with the terms and conditions under which the encroachment permit hereby applied for is issued. Furthermore, (I/We) agree to fully indemnify and hold harmless the City and all its employees, officials, and representatives from any claim, damage or injury to person or property arising or alleged to arise from any work related to the approved encroachment or work thereof. Permit is hereby granted to perform such work. A copy of the permit, the application and the specification shall be available at the jobsite at all times.

Applicant Signature: _____ Date: _____

Property Owner Signature: _____ Date: _____