Confirmation # 2689383848

ANOKA COUNTY HIGHWAY DEPARTMENT 1440 BUNKER LAKE BLVD. N.W. ANDOVER, MN 55304

PERMIT PHONE (763) 324-3176

APPLICATION FOR PERMIT FOR INSTALLATION OF UTILITIES OR FOR PLACING OBSTRUCTIONS ON COUNTY HIGHWAY SYSTEM

OFFICE USE ONLY

| | Permit Number 22-650 | | | |
|--|---|--------------------------------------|--------------------------------------|--|
| Permit Fee \$150.00 | CSAH/C.R. CSAH 14 - MAIN ST License/Permit Bond Required \$ ON TILE | | | |
| Name of applicant: Comcast | (Crystal Dopp) - Job # JB0001204590 | Teleph | none: 651-583-1103 | |
| Address (street, city, state, zip code): 4255 Lexington Ave. N. (Suite 100) Arden Hills, MN 55126 | | | | |
| Name of individual/company performing work: Universal Services, Inc | | | | |
| Nature of work: Underground Cable Installation (Replacing a bad cable) Method of installation/construction: Directional boring, hand digging | | | | |
| Address of work site: 7111 21st Ave N (NW corner of 21st Ave & Main St) | | In the city/township of: Centerville | | |
| Surface to be disturbed: | | Is the shoulder to be disturbed? | | |
| X Ditch Gravel Bituminous Concrete None | | Yes X No | | |
| Number and size of excavations: | | Will traffic be obstru | | |
| (1) 3' x 3' x 36" | | | Yes X No | |
| Size and kind of pipe/cable: 2" HDPE Conduit / .625" Coax Cable | | Depth from surface | 36" - 48" | |
| Work to start on or after: 10/18/2022 | | Work to be complet | ded by: 4/18/2023 | |
| Restrictions: SEE ATTACHED | | | | |
| GENERAL INFORMATION | | | | |
| One permit must be approved for each County Road on which work will be performed prior to any work within the right-of-way by any | | | | |
| | litions which threaten the safety of the public and rec | • | | |
| rule. The utility/contractor, under these conditions, is permitted to begin and/or complete the necessary repairs. A written permit is to be completed at the earliest possible date. | | | | |
| A license-permit bond is generally required of the contractor, the amount of which will be determined by the nature of the utility work. | | | | |
| | eany each permit application which will show the loca ht-of-way line. A complete set of plans is required fo | | | |
| | applicant to determine which of the special condition | | | |
| to each permit. | | | | |
| The Anoka County Highway Department (ACHD) reserves the right to revoke any utility permit and halt work if, upon inspection of any job site, the special conditions listed on the reverse side of this form are not met and/or a hazard exists for the applicant or public | | | | |
| safety is threatened. | | | | |
| The applicant shall notify ACHD immediately upon completion of project so that the ACHD can inspect the site to determine whether | | | | |
| or not restoration has been satisfactorily completed. | | | | |
| I, We, the undersigned, herewith accept the terms and conditions of the regulations as laid down by the County of Anoka and agree | | | | |
| to fully comply therewith to the satisfaction of the ACHD. The County of Anoka, Its officials and employees shall be held harmless, | | | | |
| by the permittee, from any demands, claims or suits arising out of the granting of the permit. Date 9 / 21 / 22 Applicant's Signature Crystal Dobb | | | | |
| | | | | |
| | AUTHORIZATION OF PERMI | Т | | |
| In consideration of the applicant's agreement to comply in all respects with the regulations of the ACHD covering such operations, permission is hereby granted for the work to be done as described in the above application. Said work to be done in accordance with | | | | |
| the general conditions listed above and the special conditions required as hereby stated: (SEE REVERSE SIDE OF THIS FORM | | | | |
| FOR SPECIAL CONDITIONS). | | | | |
| It is expressly understood that this permit is conditioned upon replacement or restoration of the County Highway and its right of way to their original or to a satisfactory condition. It is further understood that this permit is issued subject to the approval of local city or | | | | |
| township authorities having joint supervision over said street or highway. | | | | |
| ANOKA COUNTY HIGHWAY DEPARTMENT | | | | |
| | 0.24 01 | 50 | | |
| Approved by Joseph J. MacPharson Issued by S. B. Date 10/18/2022 | | | | |
| Distribution: White-Applicant Yellow-Highway Department Permit Office | | | | |
| | | | | |
| DETACH AND RETURN THIS STUB | | Send to: Permit : | Section County Highway Department | |
| Permit Number | | | unker Lake Blvd. N.W. | |
| Date Completed// | | | r, MN 55304 | |
| Name Of Applicant | | | | |

SPECIAL CONDITIONS FOR ADVANCE NOTIFICATION FOR COMMENCEMENT & COMPLETION OF WORK

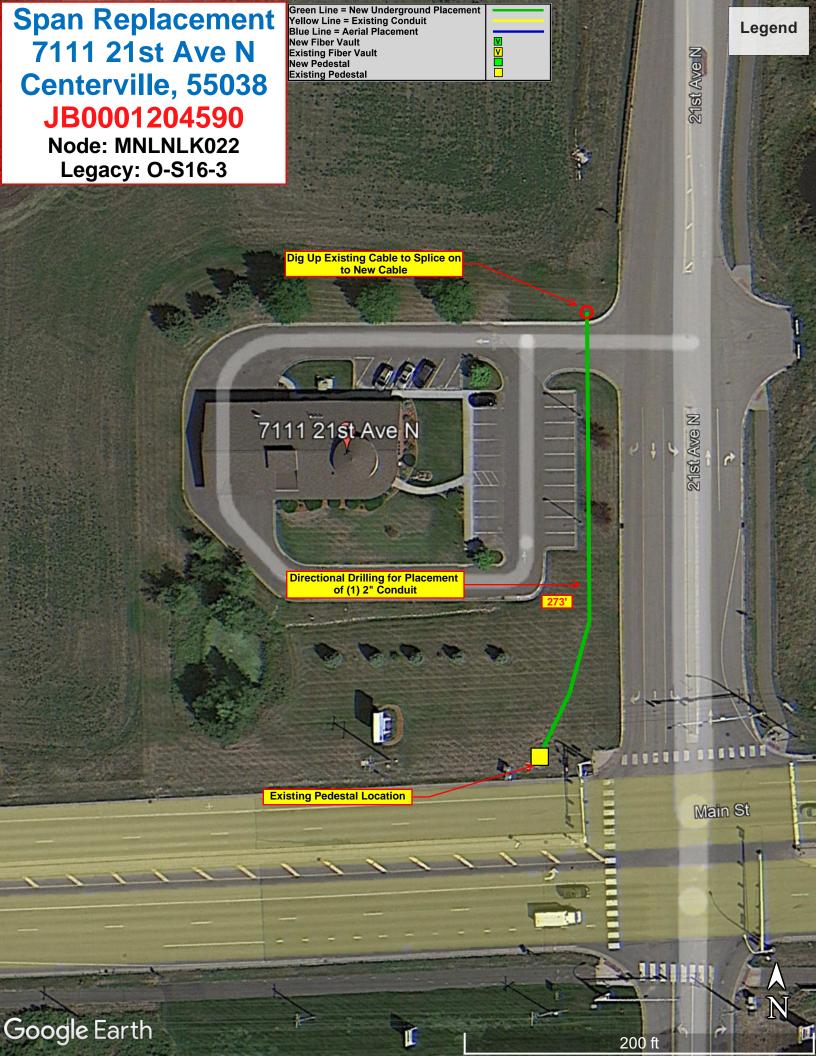
| PERMII HOLDER: |
|---------------------|
| PERMIT NUMBER: |
| CONTRACTOR CONTACT: |
| PERMIT ACTIVE DATE: |
| PERMIT EXPIRE DATE: |

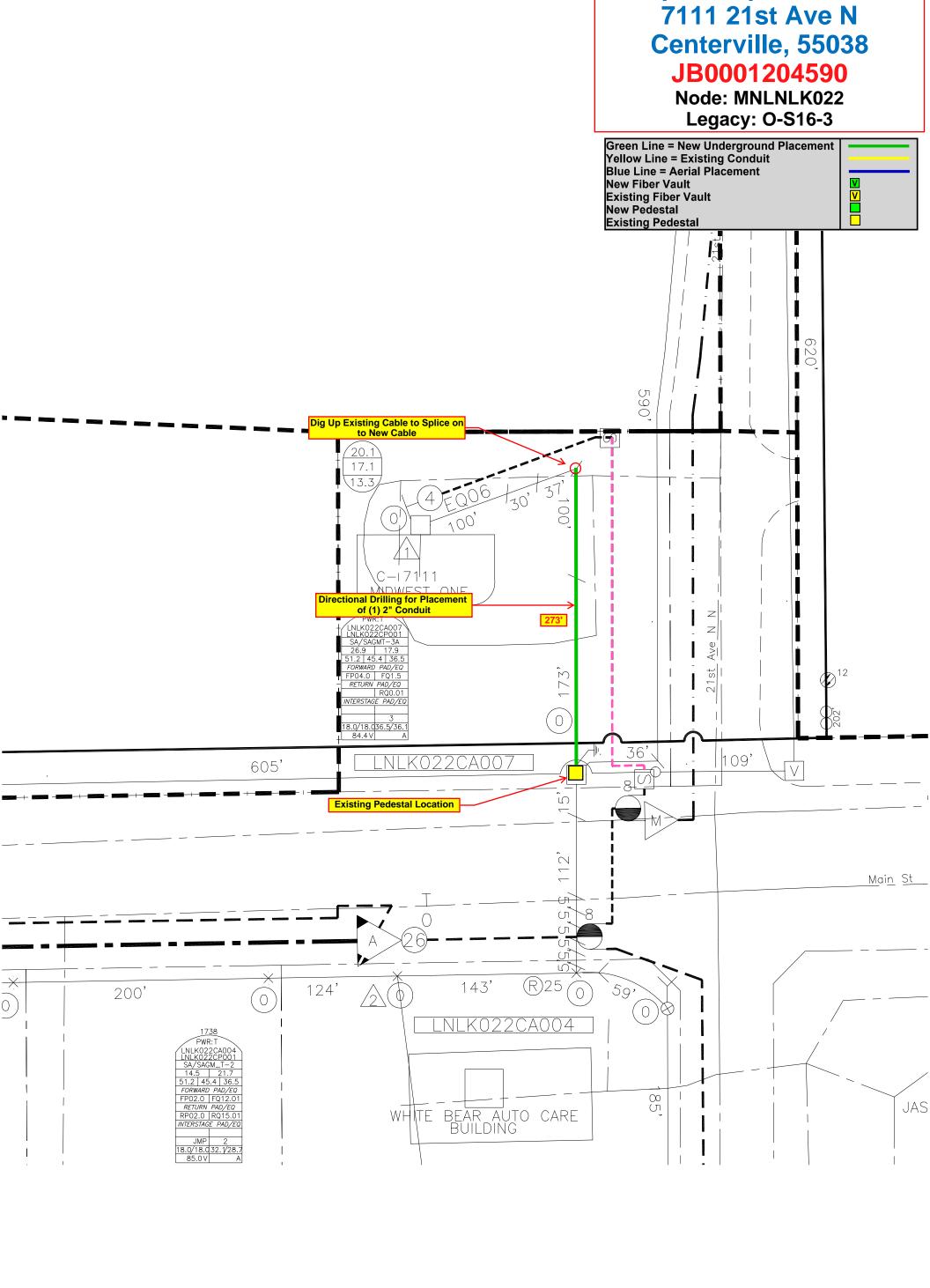
COPY ALL SUBCONTRACTORS, INSTALLERS, AND CREW SHALL POSSESS Α OF ALL DOCUMENTS IN RELATION TO THE APPROVED PERMIT THE PRIOR TO COMMENCEMENT OF WORK AND BE KEPT ON SITE. THIS INCLUDES, BUT IS NOT LIMITED TO, THE FOLLOWING:

- APPROVED PERMIT
- NOTIFICATION SHEET
- ANY/ALL TRAFFIC CONTROL LAYOUTS/PLANS

SPECIAL CONDITIONS

- ALL TRAFFIC CONTROL SHALL BE IN ACCORDANCE WITH THE MOST CURRENT VERSION OF THE MNDOT TEMPORARY TRAFFIC CONTROL FIELD MANUAL
- SHOULDER CLOSURE IF ANY PORTION OF THE SHOULDER IS ENCROACHED. LAYOUT 8
- ALL TRAFFIC CONTROL DEVICES SHALL BE REMOVED, SIGNS TURNED, LAID DOWN, OR COVERED AT THE END OF EACH WORK DAY, OR WHEN NO WORK IS TAKING PLACE UNLESS WRITTEN APPROVAL STATING OTHERWISE
- SHALL NOTIFY ANDREA SCHMID (andrea.schmid@co.anoka.mn.us or 763-324-3128) 48
 HOURS PRIOR TO THE COMMENCEMENT OF WORK WITH THE PERMIT NUMBER,
 THE DATE/TIME WORK IS TO BE PERFORMED, AND THE ESTIMATED DURATION
 OF WORK
- SHALL NOTIFY ANDREA SCHMID (andrea.schmid@co.anoka.mn.us or 763-324-3128)
 WHEN WORK IS COMPLETE
- EXCAVATIONS/PITS TO BE PROTECTED AT ALL TIMES OR TO BE BACKFILLED WHEN UNATTENDED OR OVERNIGHT
- NO WORK DURING INCLEMENT WEATHER OR WHEN PLOWS ARE OUT IN ANY CAPACITY
- SHALL NOTIFY ACHD SIGNALS @ 612-801-8969 PRIOR TO WORK AND FOR SIGNAL LOCATES





Span Replacement