

# Application to Work in Streets and Alleys

For Office Use Only



Right of Way Management Division

Walk-in: 900 E. Broad St., Room 110, Richmond, VA, 23219

Phone: 804-646-0436

Email: [RightofWay@Richmondgov.com](mailto:RightofWay@Richmondgov.com)

Plan Number: \_\_\_\_\_

Permit Number: \_\_\_\_\_

WISP\*\*\*ALL FIELDS ARE REQUIRED\*\*\*

Applicant: Name: \_\_\_\_\_ Contact Number: \_\_\_\_\_ Check one: Owner  Contractor  Representative

### Property Owner Information:

Owner Name \_\_\_\_\_ E-mail Address \_\_\_\_\_

Address \_\_\_\_\_ Office/Home Number \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_ Contact Person Name: \_\_\_\_\_

Contact Signature \_\_\_\_\_ Contact Cell Number \_\_\_\_\_

### Contractor Information:

Contractor License # \_\_\_\_\_ Contractor License Classification \_\_\_\_\_ Contractor License Class \_\_\_\_\_

Contractor Name: \_\_\_\_\_ E-mail Address \_\_\_\_\_

Address \_\_\_\_\_ Office Number \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_ Contact Person Name \_\_\_\_\_

Contact Signature \_\_\_\_\_ Contact Cell Number \_\_\_\_\_

### Proposed Work/Site Location:

Address: Street Number: \_\_\_\_\_ Street Name: \_\_\_\_\_

Parcel ID : \_\_\_\_\_ Location (Circle): Alley Front of Bldg. Side of Bldg. Travel Lane Ditch Curb/Parking Lane Other

### Description of work to be performed:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_ as per attached plans

Work to be completed within \_\_\_\_\_ days Start Date: \_\_\_/\_\_\_/\_\_\_ End Date: \_\_\_/\_\_\_/\_\_\_

For City Use or Franchise Use ONLY - Circle One: City of Richmond Dominion Energy Verizon

**\*BACK PAGE MUST BE COMPLETED OR APPLICATION WILL NOT BE REVIEWED\***

Contractor Estimated Cost of Work: \_\_\_\_\_

LOSS OF PAID PARKING REQUIRES PAYMENT AND PERMIT FROM PARKING. PAID PARKING SPOTS LOSS: \_\_\_\_\_

If this application is associated with a plan of development, special use permit, building (commercial), building (residential) or subdivision:

BLDC #: \_\_\_\_\_

POD#: \_\_\_\_\_

SUP#: \_\_\_\_\_

SUB#: \_\_\_\_\_

BLDR#: \_\_\_\_\_

ENCR#: \_\_\_\_\_