

APPLICATION TO WORK WITHIN THE RIGHT-OF-WAY

APPLICATION MUST BE FULLY COMPLETED, INCLUDING REQUIRED PLANS, PRIOR TO CONSIDERATION. FIVE (5) BUSINESS DAYS ARE REQUIRED FOR PROCESSING.

The purpose of the application and permit is for the Applicant/Permittee to provide proof of financial resources sufficient to provide for the restoration and repair of the affected public right-of-way. In processing the application, and in granting the permit, El Paso County does not express or imply that the property in question is public right-of-way. Furthermore, in processing the application or in granting the permit, El Paso County does not warrant or represent that the property in question is public right-of-way. It shall be the Applicant's/Permittee's sole and exclusive responsibility to acquire any and all property and/or contractual rights to perform work in any property that is not public right-of-way. El Paso County is not responsible or liable for any entry into or use of property that is not public right-of-way.

THE FOLLOWING PLANS MUST ACCOMPANY THE APPLICATION PERMIT # _____

One (1) set of construction plans; Two (2) sets of traffic control plans or an acceptable alternative.

DATE OF APPLICATION: 1 APR 15 DATE TO BEGIN: 2 APR 15 DATE OF COMPLETION: 14 APR 15
 NAME OF APPLICANT: Jonathan Bruno/Mark Petee COMPANY: CUSP
 TELEPHONE: 719.748.0033 ADDRESS: 38000 Cherokee Ave., Lake George
 CITY: Lake George STATE: CO ZIP CODE: 80827
 WORK BEING PERFORMED FOR: MT Herman CWPP
 PARTY RESPONSIBLE FOR PERMIT FEE: Warmed
 BOND AND INSURANCE ON FILE WITH EL PASO COUNTY DEPARTMENT OF TRANSPORTATION: YES NO
 ROAD REPAIRS BY: N/A

TOTAL LAND AREA TO BE DISTURBED (ACRES): Approx. 1500 Linear Feet of Gambel Oak
 EROSION STORMWATER QUALITY CONTROL PERMIT REQUIRED.

THIS APPLICATION IS MADE TO WORK IN PUBLIC RIGHT-OF-WAY/EASEMENT
 FOR THE PURPOSE OF (Check all that apply): INSTALLING REPAIRING REMOVING REPLACING
 CURB/GUTTER SIDEWALK ELECTRIC GAS TELEPHONE WATER WASTEWATER
 OTHER Wildfire Mitigation
 REMARKS: Mitigation of Vegetative Fuels Only. No earth will be dug

WORK IN R.O.W.
 Please indicate the name of roads to be cut, the location, and dimensions of the cut. If the dimensions of the actual cut exceed those approved in the permit, additional degradation fees will be assessed.

Road #1: Doolittle Rd (Upper) Bore Cut Dimensions of Cut: _____ feet in Width/ 300 feet in length
 Location (mile marker or nearest intersecting-street) _____
 Surface Type (Check all that apply) HMA Low Grade Paving Gravel Shoulder/Ditch

Road #2: MT Herman Lane Bore Cut Dimensions of Cut: _____ feet in Width/ 700 feet in length
 Location (mile marker or nearest intersecting-street) _____
 Surface Type (Check all that apply) HMA Low Grade Paving Gravel Shoulder/Ditch

Road #3: Turner Rd Bore Cut Dimensions of Cut: _____ feet in Width/ 40 feet in length
 Location (mile marker or nearest intersecting-street) _____
 Surface Type (Check all that apply) HMA Low Grade Paving Gravel Shoulder/Ditch

Road #4: Evans Road Bore Cut Dimensions of Cut: _____ feet in Width/ 100 feet in length
 Location (mile marker or nearest intersecting-street) _____
 Surface Type (Check all that apply) HMA Low Grade Paving Gravel Shoulder/Ditch

ROAD AND LANE CLOSURES

Please indicate the location, number of days, hours of daily occupancy by applicant's activities/closure, and work zone length for each type of facility impacted by the proposed work. **Note if a traffic control plan is not provided indicating work zone length the work zone will be assumed to extend 200 feet either side of the work area associated with a tap on a local street, 500 feet in both directions from a work area on a local street, 1000 feet in both directions from the work area on a collector, and 1500 feet in both directions from the work area on an arterial street.** By limiting work to specific hours and limiting the time work is performed/closures are in place in the right-of-way during peak hours (6:30-9:00 am and 3:30-6:30 pm), disruption fees may be reduced. **If hours are not provided, fees will be charged for the entire 24 hour period.**

Roads Doolittle Rd (1st Direction of Travel) Posted Speed Limit? 30 mph
 Work in parking lane/shoulder between edge of pavement and edge of right-of way required? Yes No
 No. of Days 1 Time Area will be Occupied/Closed Daily (ic: 9:00 a.m. - 4:00 p.m.) 1000 - 1500 hrs
 Work Zone Length in Feet (Distance from cone to cone) 300'
 Work in 1st Travel Lane? Yes No
 No. of Days _____ Time Area will be Occupied/Closed Daily _____
 Work Zone Length in Feet (Distance from cone to cone) _____
 Work in 2nd Travel Lane? Yes No
 No. of Days _____ Time Area will be Occupied/Closed Daily _____
 Work Zone Length in Feet (Distance from cone to cone) _____
 Work in 3rd Travel Lane? Yes No
 No. of Days _____ Time Area will be Occupied Daily _____
 Work Zone Length in Feet (Distance from cone to cone) _____
 Detour Required? Yes No
 No. of Days _____ Time Detour will be in Place Daily _____
 Length of Detour Route _____

Road #2: MT Herman Lane (2nd Direction of Travel) Posted Speed Limit? 30 mph
 Work in parking lane/shoulder between edge of pavement and edge of right-of way required? Yes No
 No. of Days 1 Time Area will be Occupied Daily 1000 - 1500 hrs
 Work Zone Length in Feet (Distance from cone to cone) 700'
 Work in 1st Travel Lane? Yes No
 No. of Days _____ Time Area will be Occupied Daily _____
 Work Zone Length in Feet (Distance from cone to cone) _____
 Work in 2nd Travel Lane? Yes No
 No. of Days _____ Time Area will be Occupied Daily _____
 Work Zone Length in Feet (Distance from cone to cone) _____
 Work in 3rd Travel Lane? Yes No
 No. of Days _____ Time Area will be Occupied Daily _____
 Work Zone Length in Feet (Distance from cone to cone) _____
 Detour Required? Yes No
 No. of Days _____ Time Detour will be in Place Daily _____
 Length of Detour Route _____

Road #3: Turner Road (1st Direction of Travel) Posted Speed Limit? 30 mph
 Work in parking lane/shoulder between edge of pavement and edge of right-of way required? Yes No
 No. of Days 1/2 Time Area will be Occupied Daily 1000 - 1500 hrs
 Work Zone Length in Feet (Distance from cone to cone) 40'
 Work in 1st Travel Lane? Yes No
 No. of Days _____ Time Area will be Occupied Daily _____
 Work Zone Length in Feet (Distance from cone to cone) _____
 Work in 2nd Travel Lane? Yes No
 No. of Days _____ Time Area will be Occupied Daily _____
 Work Zone Length in Feet (Distance from cone to cone) _____
 Work in 3rd Travel Lane? Yes No
 No. of Days _____ Time Area will be Occupied Daily _____
 Work Zone Length in Feet (Distance from cone to cone) _____
 Detour Required? Yes No
 No. of Days _____ Time Detour will be in Place Daily _____
 Length of Detour Route _____

Road #4: Evans Road (2nd Direction of Travel) Posted Speed Limit? 30 mph

Work in parking lane/shoulder between edge of pavement and edge of right-of way required? Yes No
No. of Days 12 Time Area will be Occupied Daily ~~10000~~ 1500 hrs
Work Zone Length in Feet (Distance from cone to cone) 100

Work in 1st Travel Lane? Yes No
No. of Days _____ Time Area will be Occupied Daily _____
Work Zone Length in Feet (Distance from cone to cone) _____

Work in 2nd Travel Lane? Yes No
No. of Days _____ Time Area will be Occupied Daily _____
Work Zone Length in Feet (Distance from cone to cone) _____

Work in 3rd Travel Lane? Yes No
No. of Days _____ Time Area will be Occupied Daily _____
Work Zone Length in Feet (Distance from cone to cone) _____

Detour Required? Yes No
No. of Days _____ Time Detour will be in Place Daily _____
Length of Detour Route _____

Alleys

Alley Name: _____
No. of Days _____ Time Alley will be Occupied Daily _____

Sidewalk

Location of Sidewalk #1 (Adjacent Road Name and Mile Markers): _____
No. of Days Sidewalk will be Closed _____

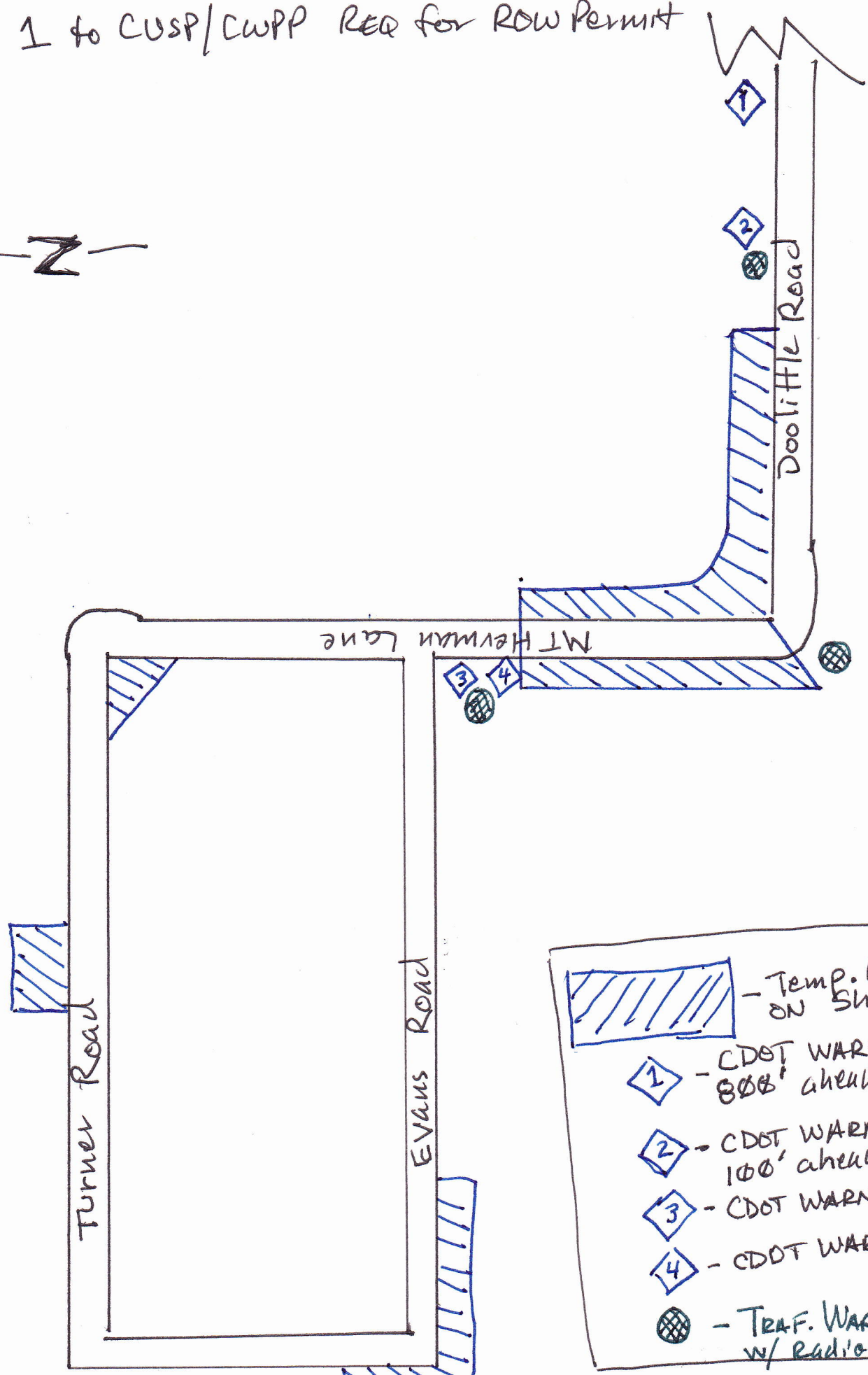
Location of Sidewalk #2 (Adjacent Road Name and Mile Markers): _____
No. of Days Sidewalk will be Closed _____

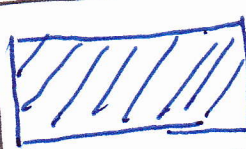





Please list any additional roads, alleys and sidewalks affected by work zones or closures on separate sheet or specifically within the traffic control plan.

NOTICE: ROAD CLOSURE WILL NOT BE PERMITTED UNLESS ALL OTHER METHODS OF INSTALLATION HAVE BEEN DETERMINED UNFEASIBLE. ALL UNDERGROUND UTILITY INSTALLATIONS ARE TO BE A 30-INCH MINIMUM DEPTH. ALL OVERHEAD UTILITY INSTALLATIONS ARE TO BE AT A 19-FOOT MINIMUM HEIGHT. TRAFFIC CONTROL, INCLUDING DETOUR-ROUTING, MUST COMPLY WITH THE CURRENT ISSUE OF MANUAL ON UNIFORM TRAFFIC CONTROL DEVICES. UTILITIES OR OTHER FACILITIES INSTALLED UNDER THIS APPLICATION ARE SUBJECT TO RELOCATION, ADJUSTMENT AND MODIFICATION AT THE OWNER'S EXPENSE IN THE EVENT EL PASO COUNTY DETERMINES SUCH IS NECESSARY IN ORDER TO PERFORM ROAD, BRIDGE OR DRAINAGE REPAIRS, MODIFICATIONS, OR IMPROVEMENTS.

Revised
04/21/2014

Encl 1 to CUSP/CWPP REQ for ROW Permit



-  - Temp. Work ON Shoulder
-  - CDOT WARN SIGN 800' ahead of work
-  - CDOT WARN SIGN 100' ahead of work
-  - CDOT WARN SIGN
-  - CDOT WARN SIGN
-  - TRAF. WARN Personnel w/ Radios

Note: Work will progress from Doolittle → Turner → Evans gradually over the requested Permit Period.