



# City of Flagstaff

# Community Development Division

211 W. Aspen Ave  
Flagstaff, AZ 86001

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Staff contact: Mac McNamara [mmcnamara@flagstaffaz.gov](mailto:mmcnamara@flagstaffaz.gov)



Date Received	<b>Application for Right-of-Way Permit</b>		Permit Number
<b>Type of Work</b> <input type="checkbox"/> Driveway approach <input type="checkbox"/> Franchise utility installation <input type="checkbox"/> Water/Sewer service <input type="checkbox"/> Other (specify) _____			
Site Address	Proposed Completion Date	Estimated Value of Work	
<b>Description of Work</b> (Permit will be limited to this scope)			
<b>Project Owner</b> (only for work within City of Flagstaff easements)			
Address		City, State, Zip	
Contact Name			
Contact Phone		Contact Email	
<b>Franchise Utility Company</b> (if applicable)			
Contact Name		Contact Phone	
<b>Contractor</b>			
Address		City, State, Zip	
Contact Name			
Contact Phone		Contact Email	
Contractor's License #	Type	Expiration Date	
City Sales Tax #			

<ol style="list-style-type: none"> <li>1. A flow chart describing the review process inclusive of applicable review time frames (administrative completeness review and substantive review) is attached.</li> <li>2. The City and an applicant may mutually agree in writing to extend the substantive review time frame (and also therefore the overall review time frame) by no more than 50% of the overall time frame.</li> <li>3. An applicant may receive clarification from the City of how it is interpreting the Engineering Standards.</li> </ol>		
<p>_____ (Owner's Initials) I hereby certify that the information set forth on this form is complete and accurate and do hereby agree to comply with all applicable codes of the City of Flagstaff and the State of Arizona and with any conditions attached hereto, and request that all pertinent City personnel access my property at any time deemed necessary to inspect work being done relating to this permit.</p>		
<b>Property Owner Signature</b> (if listed above)		<b>Date</b>
<b>Contractor Signature</b>		<b>Date</b>
<b>For City Use</b>		
<b>Received By:</b>		<b>Fee Receipt #:</b>
<b>Approval:</b> <input type="checkbox"/> Yes <input type="checkbox"/> No	<b>Staff Initial:</b>	<b>Date Approved:</b>

**Right-of-Way Permit Application Checklist**

For an application to be accepted, the applicant must provide all of the required information described on the application at the time of formal submittal. **Incomplete applications will not be accepted.** It is the responsibility of the applicant to ensure the accuracy of the application. The application shall be submitted to a Community Development Division staff person, and shall contain the following information:

1. Completed application form.
2. Three (3) paper sets of construction drawings.
3. A traffic control plan if work requires traffic restrictions, sidewalk restrictions, or street closure per section 13-15-001-0001.G of the Engineering Standards.
4. One (1) copy (or have one on file at Community Development Division active within the prior year) of a Certificate of Commercial General Liability Insurance at limits of a minimum of \$1,000,000 per occurrence, naming the City as an additional insured per section 13-15-001-0001.B of the Engineering Standards.

**Staff Review:** Upon receiving a complete application, the application will be reviewed by City staff to determine if the submittal conforms to City of Flagstaff Code requirements.

**Approved Permit:** Upon review and approval of the application the applicant will be informed that the permit is ready to be picked up.

**Permit Fee:** The applicant shall pay the required permit fee at the time of permit pick up.

**Inspection:** When improvements are completed, the applicant must contact the Engineering Section to schedule an inspection. The inspector will either approve the work as completed, or require additional corrections. Upon approval, the inspector will sign off on the work and record the approval in the City's permit tracking system.

# RIGHT-OF-WAY PERMIT

## Administrative and Substantive Review Process

