

District Offices: <input type="checkbox"/> Toronto & East York (416-392-6593) Wards: 4, 9, 10, 11, 12, 13, 14 & 19 <input type="checkbox"/> North York (416-395-6303) Wards: 6, 8, 15, 16, 17 & 18		<input type="checkbox"/> Etobicoke York (416-394-8418) Wards: 1, 2, 3, 5 & 7 <input type="checkbox"/> Scarborough (416-396-7505) Wards: 20, 21, 22, 23, 24 & 25		Application Date Day Month Year			Fees:
---	--	--	--	---	--	--	--------------

PLEASE TYPE OR PRINT IN INK

PROJECT LOCATION AND DESCRIPTION		
Street No.	Street Name	Unit No.
Any additional information required for project location		<input type="checkbox"/> Multiple Locations

PERMIT TYPE: STREET OCCUPATION PERMIT

Detailed Work Description: (Describe work to be done and equipment being used. i.e. fork lift)		If hoisting, include tonnage of crane/boom truck: _____ tonnes	
Please check one or all that apply: <input type="checkbox"/> Road <input type="checkbox"/> Sidewalk <input type="checkbox"/> Boulevard	Description:		
Proposed Dates:	From	To	No. of Parking metres
Proposed Times:	AM	PM	<input type="checkbox"/> Daily Closure <input type="checkbox"/> Continuous Closure
			<input type="checkbox"/> Renewal Permit Number

APPLICANT'S INFORMATION

I,	Last Name	First Name	
of	Company Name		
Mailing Address			
Apt/Unit No.	City	Province	Postal Code
Area Code + Telephone No.	Area Code + Fax No.	Area Code + Mobile / Pager No.	E-mail Address
For Use by Homeowner's Only:	Insurance Company	Policy Number	Expiry Date

NOTE: FOR CONTRACTORS/COMPANIES – PLEASE SUBMIT A SEPARATE CERTIFICATE OF INSURANCE (SEE NOTE 11 ON PAGE 2)

SKETCH

Identify street names, location of work, lane closures, curb lines, sidewalks etc. as it relates to work zone. Drawing may also be submitted as an attachment to the permit application.

I/We hereby certify that I/we have read and agree to abide by the conditions on the following page.

Applicant's Signature	Date	Transportation Services Witness
-----------------------	------	---------------------------------

WHITE - APPLICANT

PINK - OFFICE

I do hereby declare the following:

1. That I am the the owner as stated above
 the owner's authorized agent
 a signing officer / employee which is an authorized agent of the owner.
2. That statements contained in this application are true and made with full knowledge of all relevant matters and of the circumstances connected with this application.
3. I/We authorize the City to deduct from the Municipal Road Damage Deposit, all restoration, inspection, engineering and administration fees, of the cost of the identified works. Any credit balance after all deductions have been made, will be refunded to me following completion of the final inspection. There will be no interest paid on this deposit.
4. I/We hereby agree that all of the work shown on the approved drawings and all of the work required by the conditions listed above, shall be completed within two years unless otherwise agreed to. The Municipal Road Damage Deposit, may be used by the City, for any restoration that is not completed after this time.
5. I/We agree to notify the Transportation Services when the project is completed, so that the necessary repairs and/or work can be carried out. Any refunds will be issued following completion of final inspection.
6. I/We acknowledge that any paving or installation in proximity to trees must conform to Parks, Forestry & Recreation and Technical Services, "Specification for Construction near Trees" guidelines.
7. I/We agree that it is my/our responsibility to ensure that, if a new or relocated driveway is included in the project, nothing on the Right of Way (i.e. hydrants, poles, trees, etc) interferes with the proposed driveway. I/We further agree **not to pave** the driveway until all required sidewalk and/or curb is completed by City forces or approved contractors.
8. I/We acknowledge that excavating or digging on the Right of Way requires permission from the General Manager, Transportation Services and all relevant Public Utilities / Telecommunication Companies. Unauthorized work will be subject to by-law enforcement.
9. I/We hereby agree to indemnify and save harmless the City of Toronto and any Public Utility/Telecommunication Co., agency, board or commission having utilities within the Right of Way, which may in any manner be affected through the rights of occupation hereby granted, from and against all costs, damages, charges or expenses which are sustained as a result of such occupation.
10. I/We hereby agree that the City will not be liable for any damages caused by applicant, developer or contractors to any utility within the Right of Way, owned by any Public Utility / Telecommunication Companies.
11. The applicant/developer will provide evidence of \$2 million liability insurance with the City identified as an additional insured, or as required by the City.
12. ***I/we acknowledge that it is my/our responsibility to closely inspect the right of way abutting the property and confirm that no damage to pavements, curbs, sidewalks, public laneways, boulevards, etc. exists prior to commencement of construction. In the event that any damage exists, I/We will immediately forward a registered letter to the General Manager, Transportation Services, within ten (10) working days from the date of this application outlining specifically the damage that exists and requesting a pre-inspection. I/We agree not to commence any construction until City staff have visited the site to confirm the damage to the public right of way as noted in the registered letter. I/We could be held responsible for any or all damages at the project location.***

The personal information on this form is collected under the authority of the City of Toronto Act, 1997 and By-law No. 34-1998. The information is used to evaluate your application work within the Public Right of Way and for contact purposes. Questions about this collection can be directed to the Right of Way Supervisor in the appropriate District.

Applicant must present this form to the appropriate Right of Way Management Office by fax or email.

<p>Toronto & East York: Metro Hall 55 John Street, 17th Fl. Toronto, ON, M5V 3C6</p> <p>(T) 416-392-6593 (E) soptey@toronto.ca</p> <p>Wards: 4, 9, 10, 11, 12, 13, 14 & 19</p>	<p>Etobicoke York: Etobicoke Civic Centre 399 The West Mall, 3rd Fl. Toronto, ON ,M9C 2Y2</p> <p>(T) 416-394-8418 (E) tprowey@toronto.ca</p> <p>Wards: Wards: 1, 2, 3, 5 & 7</p>	<p>North York: North York Civic Centre 5100 Yonge Street, 4th Fl. Toronto, ON, M2N 5V7</p> <p>(T) 416-395-6303 (E) tprownyn@toronto.ca</p> <p>Wards: 6, 8, 15, 16, 17 & 18</p>	<p>Scarborough: Scarborough Civic Centre 150 Borough Drive, 2nd Fl. Toronto, ON, M1P 4N7</p> <p>(T) 416-396-7505 (E) ROWScarborough@toronto.ca</p> <p>Wards: 20, 21, 22, 23, 24 & 25</p>
---	--	---	---