



**PUBLIC WORKS DEPARTMENT  
MISSION, KANSAS  
PERMIT FOR WORK ON CITY RIGHT-OF –WAY  
CITY EASEMENT & CITY PROPERTY**

Date of Application				Permit _____
_____	_____	_____		Dig Safe Ticket No. _____
Month	Day	Year		

Bond Amount \$ \_\_\_\_\_  
 Certificate of Insurance on File \_\_\_ Yes \_\_\_ No

Utility Locates:  
 Dig Safe – 1-800-344-7233  
 Water District – 913-895-5600  
 JOCO Wastewater – 913-432-3820

**Fee: \$75**

Permit Type:						
<input type="checkbox"/> Water	<input type="checkbox"/> Gas	<input type="checkbox"/> Wastewater	<input type="checkbox"/> CATV	<input type="checkbox"/> Electric	<input type="checkbox"/> Service Main	
<input type="checkbox"/> Communications	<input type="checkbox"/> Driveway	<input type="checkbox"/> Other _____				

Applicant \_\_\_\_\_ Telephone# \_\_\_\_\_  
 Contact Name (Please Print) \_\_\_\_\_  
 Applicant Address \_\_\_\_\_  
 Email Address \_\_\_\_\_

Location and/or Street Address: _____	
Purpose:	<input type="checkbox"/> Repair <input type="checkbox"/> Abandon <input type="checkbox"/> New Main
Method of Excavation:	<input type="checkbox"/> Open Cut <input type="checkbox"/> Tunneling or Boring
Area to be Excavated:	<input type="checkbox"/> Pavement <input type="checkbox"/> Grass <input type="checkbox"/> Sidewalk
Length and Width of work area: _____	
Street Patch Date: _____	
Start Date: _____	Completion Date: _____

\*Attach a map of the work location and engineering plans, including utility drawings and traffic control plans if applicable. Please email application and documents to Brent Morton at [bmorton@missionks.org](mailto:bmorton@missionks.org) and Stephanie Boyce at [sboyce@missionks.org](mailto:sboyce@missionks.org).

Certification: I certify I have been given a copy of the Mission, Kansas Ordinance No. 1006 and that I have read and understand the provisions of that Chapter as it pertains to fees, backfill and restoration, liability to the City of Mission and method of release upon completion of my work.

Permit Issue Date: \_\_\_\_\_  
 \_\_\_\_\_  
 Permittee or Authorized Agent

Fee: \_\_\_\_\_  
 \_\_\_\_\_  
 City Engineer or Authorized Agent



<b>City of Mission 6090 Woodson Mission, KS 66202</b>	
<b>Insurance &amp; Bond Requirements for Right-of-Way Permits</b>	
Required for plumbers, irrigation installers, and others doing repairs or new construction in the right-of-way not covered by a building permit.	
Commercial General Liability Insurance	\$1,000,000/Occurrence \$ 2,000,000/Aggregate
Bond (*Original required)	\$5,000 Surety Bond with A 2-Year maintenance period
Please Note: To expedite the review and procession of your insurance and bond information. Please use the attached city forms. Insurance and bonds submitted on forms other than the city's format, may require evaluation by the city's insurance consultant and could delay the issuance of your permit.	
*We may accept a fax for the first-time applicants, but need the original prior to the issuance of subsequent permits.	



## SURETY BOND

KNOWN TO ALL MEN BY THESE PRESENTS THAT \_\_\_\_\_

Hereinafter called the Principal, and \_\_\_\_\_

Hereinafter called the Surety, are held and firmly bound unto the City of Mission, Johnson County, Kansas, in the sum of Five Thousand and No/100 (\$5,000) Dollars, to the payment of which sum, well and truly to be made, and said Principal and the Surety bind themselves, their successors, heirs, and assigns, jointly and severally, firmly by these presents.

WHEREAS, the said Principal has obtained from the City of Mission, Kansas a permit to excavate, trench, bore, or tunnel under the rights-of-way under the jurisdiction of the City of Mission: and

WHEREAS, a surety company bond is required of said Principal to guarantee the proper restoration and replacement of street rights-of-way in accordance with the plans and specifications and within the time specified for maintenance period of two years or until formally released therefrom , otherwise to remain in full force and effect.

SIGNED, SEALED, AND DATED, this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_

\_\_\_\_\_  
Principal

\_\_\_\_\_  
Surety

APPROVED:

\_\_\_\_\_  
Clerk