



City of Jeffersontown
 Department of Permitting and Enforcement
 10416 Watterson Trail
 Jeffersontown, KY 40299
 Phone: (502) 267-8333 Fax: (502) 267-0547
jeffersontownky.gov

**FOR OFFICE
 USE ONLY**

Date: _____

Permit Number: _____

Work With In Public Right-of-Way Application

- General Right-of-Way Encroachment Street Cut (Utility Work)
- Other (Specify): _____

PART 1: APPLICANT INFORMATION (Please Print)

CONTRACTOR: _____

Mailing Address: _____

City: _____ State: _____ Zip: _____

Physical Address of Site (If different): _____

MAP / DRAWING OF PROPOSED LOCATION REQUIRED

PROPERTY OWNER (If different than above.): _____

Mailing Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Email: _____

PART 2: ENCROACHMENT ACTIVITY

Please describe what work will be conducted within the public rights-of-way for City of Jeffersontown streets.

The undersigned hereby makes application for an encroachment permit to do the work outlined above and if permit is issued, agrees to comply with all existing City of Jeffersontown ordinances and to complete said work within thirty (30) days from the date of issuance and does hereby submit a bond with surety satisfactory to the City of Jeffersontown in the penal sum of five thousand dollars (\$5,000.00).

Applicant Signature: _____ Date: _____