



Culvert Permit Application

Date: _____

811 number

OWNER

Name: _____

Address of

Job: _____ Phone: _____

Email: _____ Fax: _____

Owner

Representative: _____ Phone: _____

Customer is required to have culverts installed by a contractor. This permit applies to this project only. Pipe information will be completed by Public Works Department, it will be emailed or faxed to you.

Must maintain stormwater control until job is complete. CALL 811 BEFORE DIGGING

CEMENT CULVERTS

SIZE		BOXES	
FOOTAGE			
ADAPTER			
BANDS			
NOTE			

PLASTIC/CORRUGATED CULVERTS

SIZE		BOXES	
FOOTAGE		PVC COUPLINGS	
ADAPTER			
BANDS			
NOTE			

Comments: _____

Permit fee \$60.00

CALL FOR INSPECTION ONCE JOB IS COMPLETE 337-527-4583

OWNER

CONTRACTOR

DATE

Office Use Only	Entered By	Date	Permit #