



**CITY OF DUBLIN
GENERAL RIGHT-OF-WAY APPLICATION
Exhibit "A"**

APPLICANT INFORMATION: (please print or type)				
Corporate Name:	_____	Phone #	_____	
Corporate Address:	_____	Fax #	_____	
Contact Person:	_____	Phone #	_____	
Contact Person Address:	_____	Fax #	_____	
Contact Person E-mail:	_____			
Ohio Utilities Protection Service Registration # (if applicable)	_____			
24 Hour Emergency Contact People (in order to be contacted)				
Name	Business #	Residence #	Pager#	Mobile#
1				
2				
3				

TYPE OF PERMIT APPLYING FOR	FEE *
General right-of-way (with a Service Permit)	\$770
General right-of-way (without a Service Permit)	\$770**
Special Right-of-Way	\$650
Utility Right-of-Way (a brief statement explaining why the Applicant is entitled to this type of Permit is required – Exhibit M.)	**Fees for facilities <i>not</i> in the DubLink system are:
	Less than 1 mile \$10,000
	From 1-10 miles \$17,500
	From 11-100 miles \$35,500
	From 100-500 miles \$100,000

*** Please note all application fees must be paid at the time the application is submitted.**

LENGTH OF PERMIT TERM:
MAXIMUM ALLOWABLE (Check One)
<input type="checkbox"/> GENERAL PERMITS (5 years) <input type="checkbox"/> SPECIAL PERMITS (no limit) <input type="checkbox"/> UTILITY PERMITS (coterminous with Service Agreement) <input type="checkbox"/> SHORTER TERM AS REQUESTED HEREIN (define) _____

THE FOLLOWING INFORMATION MUST BE PROVIDED, LABELED AND IDENTIFIED IN THE ORDER AND MANNER SHOWN BELOW FOR YOUR APPLICATION TO BE CONSIDERED "COMPLETE". AN OFFICER OF THE COMPANY OR OTHER LAWFULLY AUTHORIZED INDIVIDUAL MUST SIGN YOUR APPLICATION.

- General Right-of-Way Permits will require the following Exhibits: **B (in place of C, D, E, H); F; G; I; J; K; L and M (when requested).**
- Special Right-of-Way Permits will require the following Exhibits: **B (in place of C, D, E, H); F; I; J; L and M (when requested).**
- Utility Right-of-Way Permits require the following Exhibits: **B (in place of C, D, E, H); F; G; I; J; K; L and M (when requested).**

The information contained in this Application is true and correct to the best of my knowledge.

Signature _____ Date: _____
 Typed Name & Title _____

Exhibit B

Copy of valid Certification from the Public Utilities Commission of Ohio

Exhibit C

Statement of Applicant's corporate or other business entity or organization, including but not limited to, names, titles, and business addresses of all officers, and/or directors of the applicant.

Exhibit D

Detailed description of the applicant's previous experience in providing related and/or similar services as those proposed in conjunction with said application.

Exhibit E

Financial statement

Exhibit F

A statement certifying the Applicant is not delinquent on any taxes or other obligations to the City of Dublin or Franklin, Delaware, or Union Counties.

Exhibit G

A statement identifying any Service Permits awarded to the Applicant, from the City of Dublin, in accordance with Chapter 98 of the Codified Ordinances of the City. A copy of said ordinance granting such Service Permits shall also be attached and provided herewith.

Exhibit H

Proposed plan of operation of the applicant.

Exhibit I

A detailed map of facilities in or proposed to be in the Right-of-Way, prepared in accordance with the "Mapping Requirements" section (section 5) of the Rules and Regulations.

Exhibit J

A non-refundable Application Fee (initial, renewal, and/or transfer) in the form of a check, money order or wire transfer made payable to the City of Dublin.

Exhibit K

Applicant shall provide a certificate of insurance for all required insurance. Please note, those Applicants maintaining a book value in excess of ten million dollars (\$10,000,000) may submit a statement requesting to self-insure, thereby seeking exemption from the insurance requirements required herein.

Exhibit L

Explanation of why the applicant is entitled to a "Utility Right-of-Way" permit

Exhibit M

Additional information requested by the City of Dublin.