CITYWIDE PERMIT INSTALLATION OF A MAILBOX ON CITY RIGHTS-OF-WAY



Public Works Department

108 Roadrunner Drive Sedona, AZ 86336 (928) 204-7111 · www.sedonaaz.gov/PW (928) 203-5100 · ROWPermits@SedonaAZ.gov

This Permit is issued pursuant to Sedona City Code Chapter 12 Article 12.05.070.D. Anyone acting under the terms of this Permit agrees to hold the City harmless for the placement and/or the operation of the encroachments approved under this Permit. All applicable boxes shall be filled in or checked.

(X) PERMIT FOR CONFORM	ING MAILBOX INSTALLATION	
WORK START DATE:	AT LOCATION:	
ТНІ	S PERMIT IS VALID FOR ONE WEEK FRO	M THE WORK START DATE
		he Sedona City Code, the Permittee hereby s, and, Article 12-05-070.D and this Citywide
SUBMITTAL REQUIREMENTS:	The following items are required for the (Place a checkmark and date by each item)	
() Contact the Sedor	a Post Office (928-282-3511) for mailbo	x location verification.
DATE This is an importar area for installation State Law. A mini The Blue Stake C	na Blue Stake Center at 811 or 1-800-782 at step since the existing underground ut a. Please plan ahead; location of utilities mum of 2-3 workdays is required for man attenter will assign a number; place that	ilities may dictate your available is a free service and is required by rking of underground utility lines. t number here:
DATE I have reviewed A http://www.codepu	rticle 12-25 Mailboxes, and the proposed blishing.com/AZ/sedona/	d installation conforms to this Article.
() Post this Permit o	n the property at or near the work area d	luring installation.
Call 928-204-780 Inspections are co (If you leave a mes	O for a final inspection when work is comenducted Monday - Friday from 8:00 a.m: sage please leave your name, address, and	pleted. 3:00 p.m. d phone number)
NAME OF APPLICANT:		PHONE:
ADDRESS:	CITY:	ZIP:
	ood that you have reviewed the submitta oon request and shall be posted on the p	al requirements. This Permit shall be made property during the mailbox installation.
	This Permit is not valid until signed a	nd dated.
SIGNATURE OF APPLICANT:		DATE:
Work not complying in full with the	ne requirements of this Permit will require	e obtaining a separate right-of-way permit.
Contact Victor Estrada at (928) project.	204-7800 if you have questions regardi	ng whether you may use this Permit for your