

## **STREET CUT PERMIT REQUIREMENTS**

The following conditions must be satisfied prior to the issue of a Street Cut Permit:

1. A completed **Street Cut Permit Application** which includes the following:
  - a. Contractor's Business name, address, phone/fax/cell, and email address
  - b. Contact person for field & office including phone/cell and email address
  - c. Applicant's name, address, and contact information; i.e. phone and email address.
  - d. Contractor's State Business License, type, and **expiration date**
  - e. Contractor's City of Colton Business License and **expiration date** (not applicable to utility companies which have a Franchise Agreement with the City of Colton)
  
2. Proof of Insurance:
  - a. Contractors shall supply a current & valid Certificate of Insurance indicating the following:
    - a) General Liability, Auto, Workers Comp (where applicable)
    - b) Minimum \$1,000,000.00 policy w/ current endorsement naming City of Colton as additional insured
    - c) Must be a "wet signed" original; facsimile may be submitted as long as original is sent by "Overnight Express" and received in the Engineering Department within three (3) days of issue of permit.
  - b. Property owners may be required to submit a copy of their Homeowners Insurance.
  
3. A refundable deposit in an amount equal to the Plan Check Fees (See attached Fee Schedule) for the total cost of the proposed work, with a minimum of \$250.00, is required. (Not applicable to utility companies franchised with the City). Upon completion of the work and City of Colton Engineering Inspector's written acceptance of the trench repair, a written request for reimbursement of the deposit will be honored.
  
4. Underground Service Alert (USA) Identification Number(s).
  
5. Two (2) sets of the plan of the proposed work, showing:
  - a. Property address (for homeowners),
  - b. Street name,
  - c. Nearest cross street
  - d. Centerline of street,
  - e. Curb & sidewalk (where applicable), and
  - f. Location of proposed cut. (with a minimum of two (2) measurements showing distance from curb, centerline, or other reference point)
  - g. Length and width of proposed cut.
  
6. A schedule for the proposed work, indicating the start and anticipated completion dates.
  
7. A clear temporary Traffic Control Plan (TCP) adhering to the standards set forth by the CA Manual on Uniform Traffic Control Devices (CA MUTCD) showing the proper diversion of traffic and or detour(s).

Trench repair shall be inspected for compaction prior to repair, and again upon completion of the temporary patch and again upon completion of the final trench repair. A minimum of twenty-four (24) hours is required for Inspection requests.

Contact Inspector at (909) 370-5065, or by Fax @ (909) 370-5072.