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## **DRIVEWAY & SIDEWALK PERMIT**

Permit #:	
Issue Date:	
Expiration Date:	
Issued By:	

Site Address:		
	gle apron replacement	Multiple apron replacement
CONTRACTOR		
Name:		Phone No.:
Address:		·
Email Address:		
OWNER		
Name:		Phone No.:
Email Address:		
signing this application. A from any and all actions, o	pplicant agrees to indemr	plicable conditions and provisions of this permit by nify, hold harmless, and defend the City of Lakeland uits, or judgements whatsoever, in conjunction with es, resulting from injury or death of any person or

persons, and loss of or damage to property caused by, resulting from, or in any way associated with the proposed work within the City right-of-way. Applicant acknowledges that driveways shall be constructed in accordance with the City of Lakeland Engineering Standards Manual, FDOT Index 522-03, and the State of Florida Erosion and Sediment Control Designer and Reviewer Manual.

SIGNATURE: DATE:

Applicant/Owner/Contractor shall provide proof of insurance as required by the City of Lakeland Office of Risk Management. Contact (863)834-8783 for coverage requirements.

All work shall be performed in accordance with the City of Lakeland Standards, Codes and Regulations, and under the direction of the Public Works Department. Enhanced driveway features (such as brick pavers or driveway paint) are installed within the right-of-way at the owner's risk. If the City replaces a driveway it is only required to be replaced with concrete in the right-of-way.

- 1. When the forms have been installed, prior to the placement of concrete, a pre-pour inspection is required. To schedule your PW Driveway Pre-pour inspection, call the IVR automated line at 863-213-0481.
- 2. A PW Driveway Final inspection is required after completion; the forms have been removed and the right-of-way has been restored. Call the IVR automated line at 863-213-0481 to schedule.

## 24 HOURS NOTICE IS REQUIRED FOR EACH INSPECTION TO BE PERFORMED

\*Permit expires sixty (60) days from date of issuance.