



City of Windsor Heights

www.windsorheights.org

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SIDEWALK / DRIVEWAY PERMIT

DATE: _____

PERMIT FEE: \$30

JOB ADDRESS: _____

PROPERTY OWNER: _____

CONTRACTOR (NAME AND ADDRESS): _____

CONTRACTOR PHONE: _____

INSTRUCTIONS TO PROPERTY OWNERS/CONTRACTORS FOR THE CONSTRUCTION OF SIDEWALK OR DRIVEWAY APPROACHES:

1. All sidewalks shall be four (4) feet wide, four (4) inches thick except through driveway sections, where it will be six (6) inches thick.
2. all concrete for sidewalks will have a minimum twenty-eight (28) day compressive strength of thirty-five (3,500) PSI under laboratory conditions.
3. The standard slope shall be 1/4" per foot in the sidewalk and 1/4" per foot in the driveway approach. The sidewalk will be one (1) foot outside the property lines (class "B" sidewalk). If the Director of Public Services, at the time the forms are inspected, deems the standard grade create severe problems, they shall direct the property owner to go to the Windsor Heights City Hall and sign a waiver, which becomes part of the sidewalk and driveway permits.
4. The Director of Public Services will inspect all forms before sidewalk and driveway approaches are poured. A final inspection will be made after the project is completed.
5. Expansion joints shall be placed twenty (20) feet center to center on the sidewalk construction.
6. When a concrete driveway approach is to be constructed and a curb drop is not at the location of the proposed approach, the existing curb shall be removed by grinding to proposed grade or by saw cutting curb and pavement full depth and removal.

SIDEWALK CONSTRUCTION CLASS C

APPROVED BY:

Director of Public Services _____ Date: _____

DRIVEWAY APPROACH CONSTRUCTION CLASS C

APPROVED BY:

Director of Public Services _____ Date: _____

NOTIFICATION STATEMENT

- A. The holder of the Iowa NPDES General Permit Number 2 can transfer Iowa NPDES General Permit Number 2 responsibility to homebuilders, new lot owners, contractors, and subcontractors. Transferees must agree to the transfer in writing, and must agree to fulfill all obligations of the SWPPP, and the Iowa NPDES General Permit Number 2. Absent such written confirmation of transfer obligations, the applicant remains responsible for compliance on any lot that has been sold.
- B. The applicant shall notify the City in writing a minimum of 5 working days prior to any application to the IDNR for release of any property from a General Permit Number 2.

PERMIT HOLDER INFORMATION (IDNR GENERAL PERMIT NO. 2 AND CITY OF WINDSOR HEIGHTS CO-SESCO PERMIT):

Name: _____

Company Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Telephone No.: _____ Email Address: _____

PROPERTY OWNER (If different from permit holder)

Name: _____

Company Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Telephone No.: _____ Email Address: _____

CONTRACTORS HAVING RESPONSIBILTY ON THE CONSTRUCTION SITE:

Name: _____

Company Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Telephone No.: _____ Email Address: _____

BY SIGNING THIS APPLICATION FORM, THE PERMITTEE UNDERSTANDS THAT:

- This permit must be approved.
- Compaction reduction must be achieved, provide soil quality restoration in areas to be vegetated.
- Concrete washout must be contained when washing out on site.
- Perimeter Controls must be in place prior to land disturbing activities unless clearing and grading is required to install the controls.
- Inlet protection must be below grade in paved areas after street inlets are installed.
- Topsoil shall be placed in accordance with the General Permit #2.
- This site must stay in compliance with Iowa NPDES General Permit #2 and the City of Windsor Heights COSESCO Permit.

SIGNATURE OF APPLICANT:	SIGNATURE OF OWNER (if different from applicant)
DATE:	DATE:

DATE: _____

APPROVED: _____
(City Staff)

Metro Area Right Of Way Application for Work

City: _____

Date of Application: _____

APPLICANT INFORMATION

Applicant Name: _____ Applicant Phone: _____ Applicant FAX: _____

Applicant Address: _____ Applicant Email: _____

FACILITY OWNER INFORMATION Check if same as applicant

Facility Owner Name: _____ Facility Owner Phone: _____

Facility Owner Address: _____ Facility Owner Email: _____

CONTRACTOR INFORMATION

Contractor (Person performing the work): _____ License Number: _____

Contractor Address: _____ Contractor Phone: _____

Contractor Email: _____

Person in Charge of Job (name): _____ 24 hr Phone #: _____

Does the contractor have a bond on file with the city? Yes No If no please attach copy

PROJECT INFORMATION WORK ORDER # _____

Construction Type: Sewer Pavement Gas Water Telecommunications Electric
 Trees Sidewalks Driveway Approach Other _____

Description of work to be performed (include details of all streets; where mobilization of contractor equipment will be located; access to driveways and sidewalks):

Start Date: _____

Approximate Completion Date: _____

REQUIRED ATTACHMENTS

- Bond (if not on file with city)
- Construction Documents i.e. drawings, traffic control, GIS Plans, etc Please
- check the city code for comprehensive list of required attachments
- Payment - \$100

INDEMNIFICATION: Please read the following city code for indemnification requirements- Chapter 135 & 141

- I have read, agreed and completed the indemnification requirements.

24 HR Notification required before starting work-please call permitting jurisdiction-see <http://www.capitalcrossroadsvision.com/row/>

Contractor Signature: _____ Date: _____

Facility Owner Signature: _____ Date: _____

CITY USE ONLY:

Date submitted: _____

Permit # (if applicable) _____

Approval Granted By: _____

Received By: _____

Form of Payment Cash Check CC

Permit Valid Until _____

Remarks:

