IOWA COUNTY SECONDARY ROAD DEPARTMENT GENERAL RIGHT OF WAY WORK PERMIT

\$25 Fe	e_	
Insurance _	1	_/

Date of Application			
I, request permission to pe of work to be done is loca		ner or agent for the o ht of way adjacent t	owner, of a parcel of property, o my property. The location
Township Name	Township #, Rar	nge #, Section#	, Road Name
Please mark the area of	the requested work with a f	lag or similar object	so we can locate it.
County specifications. In	the event a future road provents to the reserves the right to perform	blem develops beca	maintain the work according to ause of inadequate enance and charge the cost to
Signature of Applicant: _			Date
Owner (Print) :			
	oved Permit:		
Phone: ()	Time to 0	Call	
The applicant must make business hours to review		ngineer's Office at (319) 642-3721 during normal
Not conforming or acquir valid for one year from is	ing a permit is a violation of suance.	[:] section 319.14 200	3 Code of Iowa. Permit is
	is required before releasing nsured as the County's inte		tors are required to list lowa
Description of Work to be	e Performed.		
AMAN.			
	<u>For Engineer's C</u>	rffice Use Only	
Comments			