

LA GRANGE PUBLIC WORKS DEPARTMENT  
307 W. JEFFERSON STREET  
LA GRANGE, KY 40031  
PHONE (502) 222-1433 FAX (502) 222-5875  
APPLICATION FOR RESIDENTIAL UTILITIES  
ENCROACHMENT PERMIT

PERMIT # \_\_\_\_\_

DATE: \_\_\_\_\_ \$100.00 FEE: DUE AT TIME OF APPLICATION

APPLICANT NAME: \_\_\_\_\_

CONTACT PERSON: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP CODE \_\_\_\_\_

PHONE: \_\_\_\_\_ CELL PHONE: \_\_\_\_\_

EMAIL: \_\_\_\_\_

**LOCATION OF REQUESTED ENCROACHMENT: Development, Address, Lot and exact location on the property.**

Development: \_\_\_\_\_

Address & Lot #: \_\_\_\_\_

**OVERHEAD** \_\_\_\_\_ **UNDERGROUND** \_\_\_\_\_

**OTHER: (SPECIFY)** \_\_\_\_\_

APPLICANT SIGNATURE: \_\_\_\_\_

DEPARTMENT REQUIREMENTS:  
\_\_\_\_\_

DATE FILED: \_\_\_\_\_ APPROVED BY: \_\_\_\_\_

**PERMIT BECOMES NULL AND VOID IF ENTRANCE IS NOT INSTALLED  
WITHIN 90 DAYS FROM DATE OF ISSUANCE.**

# LA GRANGE PUBLIC WORKS DEPARTMENT

## ENCROACHMENT PERMIT FOR UTILITY EXCAVATIONS

### CONDITIONS:

#### **THIS PERMIT IS GRANTED PURSUANT TO THE FOLLOWING REQUIREMENTS:**

- 1.** ROADWAY CUTS SHALL BE BACKFILLED AND COMPACTED TO AT LEAST 90% OF STANDARD PROCTOR DENSITY, AND THE MOISTURE CONTENT SHALL NOT VARY FROM THE OPTIMUM MOISTURE CONTENT BY MORE THAN PLUS 2 PERCENT OR MINUS 4 PERCENT. CONCRETE FLOWABLE BACKFILL IS AN ACCEPTIBLE SUBSTITUTE FOR COMPACTED BACKFILL. FLOWABLE BACKFILL SHALL BE PLACED IN ACCORDANCE WITH 601.03.09 OF THE LATEST EDITION OF THE KENTUCKY TRANSPORTATION CABINET DEPARTMENT OF HIGHWAYS STANDARD SPECIFICATIONS FOR ROAD AND BRIDGE CONSTRUCTION.
- 2.** AFTER THE EARTH IS COMPACTED AS STATED ABOVE A 12" THICKNESS OF DGA SHALL BE PLACED AND ALSO COMPACTED PRIOR TO THE PLACEMENT OF THE ASPHALT. IF CONCRETE BACKFILL IS USED IT SHALL BE FINISHED 5" BELOW THE SURFACE AND NO DGA WILL BE REQUIRED.
- 3.** A MINIMUM OF 3" BASE ASPHALT AND 2" SURFACE ASPHALT OR 2" GREATER THAN THE EXISTING AVERAGE THICKNESS OF PAVEMENT WILL BE REQUIRED, WITH A MINIMUM OF ONE FOOT ADDITIONAL ON EACH SIDE OF THE TRENCH IF ANY DAMAGE OCCURS ADJACENT TO THE TRENCH DURING CONSTRUCTION. SAW CUTS SHALL BE SEALED BACK WITH RUBBER CRACK SEALER. THE ROADWAY SHALL BE SAW CUT ONE FOOT OUTSIDE THE TRENCH LIMITS BEFORE EXCAVATION BEGINS.
- 4.** IT IS ALSO UNDERSTOOD THAT ANY ADDITIONAL DAMAGE TO THE ROADWAY OUTSIDE THE TRENCH SECTION AS STATED ABOVE SHALL ALSO BE REPAIRED.
- 5.** EROSION CONTROL SHALL BE REQUIRED ON ALL EXCAVATIONS WITHIN THE CITY OF LAGRANGE ROAD RIGHT-OF-WAY IN ACCORDANCE WITH BEST MANAGEMENT PRACTICES FOR LAND DISTURBING ACTIVITIES.
- 6.** THE PERMIT HOLDER AGREES TO ACCEPT RESPONSIBILITY FOR ANY FOREIGN MATERIAL DEPOSITED UPON THE CITY STREET AS A RESULT OF CONSTRUCTION ON PERMITTED PROPERTY AND SHALL IMMEDIATELY REMOVE SAID MATERIAL.
- 7.** THE PERMIT HOLDER AGREES TO PROMPTLY REPAIR ANY DAMAGE DONE TO THE CITY'S RIGHT-OF-WAY RESULTING FROM HIS ACTIONS OR THOSE OF HIS AGENTS TO INCLUDE ROADWAY, DITCHES, SHOULDERS, ETC., DURING THE PERMITTED CONSTRUCTION.
- 8.** AT ANY TIME DURING THE CONSTRUCTION ON SAID PROPERTY, FAILURE TO COMPLY WITH THE TERMS OF THIS PERMIT SHALL RESULT IN A STOP WORK ORDER TO INCLUDE ANY CONSTRUCTION ON SAID PROPERTY.
- 9.** APPLICATION EXPIRES IN 90 DAYS OF ISSUANCE.

APPLICANT SIGNATURE: \_\_\_\_\_

DATE: \_\_\_\_\_

## **STREET REPLACEMENT GUIDE**

THE CITY OF LAGRANGE USING MUNICIPAL AID MONEY FROM THE STATE WILL PAY UP TO \$1,400.00 FOR THE PLACEMENT OF GRAVEL, FLOWABLE FILL, AND ASPHALT TO REPAIR DAMAGE DONE TO THE RIGHT-OF-WAY IN THE REPLACEMENT OF SEWER LINES THAT DUMP INTO SEWERS OWNED AND OPERATED BY THE LAGRANGE UTILITIES COMMISSION (L.U.C.). THIS MONEY WILL BE PAID DIRECTLY TO THE CONTRACTOR FOR THAT PORTION OF THE WORK.

REPLACEMENT OF PRIVATE SEWER LINES THAT REQUIRE THE CUTTING OF THE CITY STREET REGARDLESS OF THE LOCATION OF THE CITY SEWER WILL BE COVERED. THE TRENCH CUT MUST BE DIRECTLY IN FRONT OF OR DIRECTLY TO THE SIDE OF THE PROPERTY AND IN THE CITY RIGHT-OF-WAY. THE MAXIMUM AMOUNT FOR ANY ONE RESIDENCE IN A 5 YEAR PERIOD WILL BE \$1,400.00. THE MONEY AVAILABLE FOR EACH SEWER REPLACED. (IE) ONLY \$700.00 WORTH OF STREET REPLACEMENT WILL BE COVERED IF THE SEWER IS IN THE CENTER OF THE STREET. THE TOTAL POOL OF MONEY ALLOTTED TO THIS PROGRAM WILL BE CALLED OUT IN THE MUNICIPAL AID BUDGET FOR EACH FISCAL YEAR. WHEN THE TOTAL AMOUNT OF MONEY HAS BEEN EXHAUSTED FOR THAT FISCAL YEAR THE PROGRAM WILL BE CLOSED FOR THAT FISCAL YEAR AND MAY BE REOPENED THE FOLLOWING YEAR, BUDGET PERMITTING. APPLICATIONS WILL BE ACCEPTED AND APPROVED IN THE ORDER RECEIVED AND MUST BE ACCOMPANIED WITH THE PROPER DOCUMENTATION AS REQUIRED IN THE RULES.

# RULES

1. MUST BE A SINGLE FAMILY RESIDENCE LIVED IN BY THE PROPERTY OWNER. THE CITY MAY RECAPTURE ANY MONEY SPENT IF THE HOME OWNER SELLS, RENTS TO ANOTHER FAMILY, OR OTHER ENTITY WITHIN TWO YEARS OF THE COMPLETED WORK.
2. THE MAIN SEWER LINE OWNED BY L.U.C. MUST BE IN THE STREET OR ON THE OPPISITE SIDE OF THE STREET.
3. THE PLUMBING CONTRACTOR MUST GET PRIOR CONSENT FROM THE CITY BEFORE WORK BEGINS TO BE ELIGIBLE FOR THE PROGRAM. AN APPLICATION MUST BE APPROVED.
4. THE SEWER LINE REPLACEMENT MUST BE DONE BY A STATE LICENSED PLUMBER, WHO HAS A VALID BUSINESS LICENSE WITH THE CITY OF LAGRANGE.
5. A COPY OF THE BID TO REPLACE THE ROCK AROUND THE NEW PIPE, FLOWABLE FILL, AND ASPHALT REPLACEMENT ALONG WITH THE APPLICATION MUST BE APPROVED BY THE MAYOR OR CITY WORKS DIRECTOR BEFORE WORK CAN COMMENCE IN THE STREET.
6. INSTALLATION OF ALL WORK TO FILL AND REPLACE THE EXCAVATED TRENCH IN THE RIGHT-OF-WAY SHALL BE INSPECTED BY THE CITY OF LAGRANGE OR ITS APPOINTEE. WORK MUST MEET THE STANDARDS SET OUT IN THE KENTUCKY SPECIFICATION FOR ROAD AND BRIDGE CONSTRUCTION.
7. NO CITY EMPLOYEE, L.U.C. EMPLOYEE, CITY, COUNTY, STATE ELECTED OR APPOINTED OFFICIAL MAY PARTICIPATE IN THIS PROGRAM UNTIL HIS OR HER EMPLOYMENT, ELECTED TERM, OR APPOINTMENT HAS ENDED.
8. THIS PROGRAM IS FOR RESIDENTIAL ZONED SINGLE FAMILY DWELLINGS ONLY. DWELLINGS THAT ARE NOT OCCUPIED BY THE OWNER ARE NOT ELIGIBLE.
9. NO CONTRACTOR WILL BE ELIGIBLE WITHOUT PRIOR APPROVAL OF THE STREET REPLACEMENT APPLICATION FORM.

# STREET REPLACEMENT APPLICATION

Date: \_\_\_\_\_

Plumbing Contractor: \_\_\_\_\_

Address of Plumbing Contractor: \_\_\_\_\_

\_\_\_\_\_

Phone Number of Plumbing Contractor: \_\_\_\_\_

Sub-Contractor for Street Repair: \_\_\_\_\_

Address of Sub-Contractor: \_\_\_\_\_

\_\_\_\_\_

Phone Number of Sub-Contractor: \_\_\_\_\_

Address of Work to be done: \_\_\_\_\_

\_\_\_\_\_

Occupant's Name: \_\_\_\_\_

Date of Work to be done: \_\_\_\_\_

Depth, Width, and Length of Street Trench: \_\_\_\_\_

Cost of Material and Labor for Street Repair: \_\_\_\_\_

Signed by Plumbing Contractor: \_\_\_\_\_

**Attach a copy of the complete bid for sewer line replacement.**

Approved by Mayor for construction: \_\_\_\_\_

Date: \_\_\_\_\_

Inspected by and approved by for payment: \_\_\_\_\_