



Right-of-Way / Easement Work Permit Application

City of Osage Beach
1000 City Parkway

Osage Beach, MO 65065
573 -2030 FAX 573 302-0528

PERMIT # _____ -- _____

Owner : _____

Mailing Address _____

Telephone Number _____

Name of Party Performing Work _____

(Contractor)

Mailing Address _____

Telephone Number _____ Contractor's License # _____

Location of proposed work :

Street Address: _____

Subdivision: _____ Lot #: _____

(Attach map showing general area and specific area)

Purpose of proposed work:

(brief explanation)

Starting date: _____

Estimated completion date: _____

SPECIAL INSTRUCTION, NOTES AND/OR REQUIREMENTS:

- **A Surety Bond or Cash Bond in the amount of \$2000.00 is required for each job.** The \$2000.00 will be promptly refunded when the repairs have been inspected and approved. **It is the responsibility of the contractor or owner to call for a final inspection.**

I am familiar with the City of Osage Beach's specifications and agree to comply with the requirements (Copies are available from the Building Department).

Printed Name/ Company

Name/ Title of Issuer

Signature/ Company Representative

Date Issued

Date of Application

Approved for Completion/ Inspector Name

Date Bond Received

Date Refunded

Date Approved for Completion