

VALLEY COUNTY ROAD & BRIDGE DEPARTMENT

Application for Permit To Perform Work Within County Right of Way

Date: _____ ROAD NAME: _____

PLEASE PROVIDE ALL INFORMATION REQUESTED ON THIS FORM.

COMPLETE PERMIT APPLICATION PACKAGES WILL BE PROCESSED IN THE ORDER RECEIVED THE
OMISSION OF ANY REQUESTED INFORMATION MAY RESULT IN PERMIT PROCESSING DELAY.

Property Owner

Entity/Contractor (circle one)

_____/_____
PRINT NAME SIGNATURE(Required) Phone: _____

Company name _____

ADDRESS: _____
STREET CITY ZIP CODE

FAX: _____ CELL: _____ EMAIL ADDRESS: _____

Hereby makes application to perform work within the Valley County right of way at the following described locations, subject to the provision required by the Valley County Rights of Way Ordinance (Valley County Code 5-7-2) for which this permit is issued. In Consideration of the granting of this permit, it is agreed by the applicant that Valley County wherein the permit work is to be performed and any of the officers or employees, thereof, shall be saved harmless by the applicant from any liability or responsibility for any accident, loss or damage to persons or property, happening or occurring as the proximate result of any of the work undertaken under the terms of this application and the permit or permits which may be granted in response thereto, and that all of said liabilities are hereby assumed by the applicant. It is further agreed that if any part of the work, authorized by this permit, interferes with the future use of the highway by the general public, it must be removed or relocated as designated by the Road Department Administrator at the sole expense of the Permittee or its successor in interest.

SITE ADDRESS: _____ ASSESSOR'S PARCEL NO. _____

LOCATION DESCRIPTION: _____

START LOCATION: _____

STOP LOCATION: _____

SCOPE OF WORK:

NOTE: Applicant understands and agrees that this Application is not complete and will not be processed until a valid certificate of insurance that conforms to the requirements outlined in the Permit To Perform Work In The County Right of Way is submitted to the Valley County Road Department.

NOTE: All permit holders will indemnify Valley County for any damages resulting from work performed under the issuance of a Permit To Perform Work In the County Right of Way.

Valley County Road Department

55 Gold Dust Rd
Cascade, ID 83611
Phone: (208) 382-7195
roadapplications@valleycountyid.gov



Permit for Winter Maintenance in County Right-of-Way

Applicant: _____ Signature: _____

Address: _____ Phone: _____

County Road Name: _____ Total Feet: _____

*** Attach a site plan specifying start and stop points where winter maintenance will occur.***

Applicant understands and agrees that this Winter Maintenance in County Right-of-Way Permit ("Permit") will automatically expire on September 30 or is revoked by Valley County and Applicant must reapply for a Permit before any work in the Valley County Right of Way is performed.

Please sign and return a copy of this permit to the Valley County Road Department in person, or at 55 Gold Dust Rd, Cascade, Idaho 83611, or by email at roadapplications@valleycountyid.gov. This permit will become effective when all criteria referenced below have been satisfied.

Listed Conditions

An adequate snow base with a thickness of at least three (3) inches must be left on the roadway to minimize road damage due to plowing or snow blowing activities by Applicant.

Applicant must remove snow in such a manner that snow removal does not obstruct, interfere or damage roadway or designated parking areas.

Applicant understands and agrees that any and all corrective actions identified by Valley County in writing due to Applicant's failure to comply with the listed conditions of this Permit will be corrected within three (3) days of receiving written notice at the Applicant's expense.

Applicant understands and agree to procure and maintain in full force and effect insurance written by an insurance company or companies with AM Best's rating(s) of A VIII or better. All insurance companies must be authorized to do business in the state of Idaho. By requiring insurance herein, Valley County does not represent that coverage and limits are necessarily adequate to protect Permittee, and such coverage and limits shall not be deemed as a limitation on Permittee's liability.

Applicant understands and agrees to provide a certificates of insurance evidencing the coverages required herein shall be provided to Valley County prior to any work being performed within the Valley County Right of Way. All certificates must be signed by an authorized representative of Permittee's Insurance carrier and must state that the issuing company, its agents, or representatives will provide

Valley County thirty (30) days written notice prior to any policies being canceled or materially changed. Renewal certificates or binders must be provided to Valley County a minimum of five (5) days prior to the effective date of the renewal. If binders are used, they must be replaced by appropriate insurance certificates no more than thirty (30) days after the effective date.

Certificates must evidence the following minimum coverages:

1. WORKERS' COMPENSATION insurance meeting the statutory requirements of the State of Idaho.
2. EMPLOYERS' LIABILITY insurance providing limits of liability in the following amounts:

Bodily Injury by Accident:	\$100,000 each accident
Bodily Injury by Disease:	\$500,000 policy limit
Bodily Injury by Disease:	\$100,000 each employee
3. COMMERCIAL GENERAL LIABILITY insurance providing limits of liability in the following amounts:

General Aggregate:	\$1,000,000
Product/Completed Operations Aggregate:	\$1,000,000
Personal & Advertising Injury Liability:	\$1,000,000
Per Occurrence:	\$1,000,000
Fire Legal Liability:	\$ 50,000

The Commercial General Liability ("CGL") insurance policy shall be written on an "Occurrence" form and shall cover liability arising from premises, operations, independent contractors, products, completed operations, personal injury, advertising injury, and liability assumed under an insured contract (including tort liability of another assumed in a contract). Valley County and its elected officials, agents, employees, successors and assigns shall be included as Additional Insureds under the CGL using ISO endorsement CG 20 10. The Additional Insured endorsement CG 20 10, or its equivalent, must be provided with the certificate of insurance.

Applicant understands and agrees to indemnify, defend, and save harmless Valley County, its officers, agents, employees, and volunteers from and against any and all liability, claims, damages, losses, expenses, actions, settlements, attorneys' fees, and suits whatsoever caused by, arising out of, or in connection with Permittee and its employees, officers, agents or contractor's acts or omissions under this Agreement or Permittee's failure to comply with any county, state or federal statute, law, regulation, or rule.

It is expressly understood by the Applicant that the permission granted is not permanent or perpetual permission. Valley County reserves the right at any time and for any reason to revoke and terminate this Permit.

Applicant Signature

Date

Valley County Road Staff/ Title

Date