



**CITY OF
SHOREWOOD**
5755 COUNTRY CLUB ROAD
SHOREWOOD, MINNESOTA 55331-8927
952.960.7900 ▪ www.ci.shorewood.mn.us
cityhall@ci.shorewood.mn.us

**RIGHT OF WAY USER
REGISTRATION
APPLICATION
(Non-Franchise Utilities)**

GENERAL INFORMATION

Each person who occupies or uses, or seeks to occupy or use, the right-of-way or place any equipment or facilities in or on the right-of-way, including persons with installation and maintenance responsibilities by lease, sublease or assignment, must register with the City.

No person may construct, install, repair, remove, relocate, or perform any other work on, or use any facilities or any part thereof, in any right-of-way without first being registered with the City.

For more information of the City’s Right of Way Ordinance, Registrants are encouraged to read [Shorewood City Code, Chapter 901](#)

APPLICANT INFORMATION

Company: _____

Address: _____

Phone Number: _____ Fax Number: _____

Email: _____

Gopher State One Call Registration Certificate Number (if required by State Law): _____

- New Applicant Information Update (required to be submitted within 15 days following the date on which the registrant has knowledge of any change)

LOCAL REPRESENTATIVE
(Person responsible for fulfilling the obligations of the registrant)

Name: _____

Address: _____

Phone Number: _____ Fax Number: _____

Email: _____

24-HOUR EMERGENCY CONTACT INFORMATION

Name: _____ Cell Phone Number: _____

Name: _____ Cell Phone Number: _____

Name: _____ Cell Phone Number: _____

REQUIRED SUBMITTALS

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- A. INSURANCE. See attached Section 901.06 Subd.3 (c) of the City Code for insurance requirements.
- B. If a corporation, a copy the certificate is required to be filed under MN Statutes 300.06 as recorded and certified to by the Secretary of State.
- C. If applicable, a copy of the order granting a certificate of authority from the Minnesota Public Utilities Commission or other authorization or approval from the applicable state or federal agency to lawfully operate.

SIGNATURE

Applicant's Signature: _____ **Date:** _____

Name (printed): _____ **Its:** _____

ACKNOWLEDGEMENT OF INDEMNIFICATION

The applicant hereby acknowledges the indemnification provided by Subd. 2 of Subsection 901.25 of the City Code. NOTE: This acknowledgement need not be provided by a company holding a franchise with the City

Applicant's Signature: _____ **Date:** _____

Name (printed): _____ **Its:** _____

FOR CITY USE ONLY

Date that \$2,000 registration fee submitted: _____

Receipt number _____