



CITY OF SARATOGA SPRINGS

EXCAVATION / ENCROACHMENT PERMIT

Engineering Department
213 North 900 East
Saratoga Springs, UT 84045
Phone: (801) 766-6506
Fax: (801) 766-9296

Name of Grantee: CentraCom Interactive

Billing Address: PO Box 7

City/State: Fairview, Utah Zip: 84629 Office Phone: (435) 427.0648

Email: pamrigby@centracom.com Fax: (435) 427.0808

Name of Contractor: CentraCom/MKJ Construction State License Number: 87-0537159

Contractor's Email: pamrigby@centracom.com Fax: (435) 427.0808

Office Phone: (435) 427.0648 Cell Phone: (435) 469.0394

Work Location: Quick Quack 66 W Pioneer Crossing

Purpose of Excavation: Installing 480' 1 1/4" conduit/fiber. Installing 2 handholes

Proposed Construction Start Date: 1/3/18 Time: 8:00 a.m.

Estimated Completion Date: 1/25/18 Time: 5:00 p.m.

CITY OFFICE USE ONLY

Application Date: 12/12/17 Date Issued: 12/19/17

Permit # SAR-STX-12B2-17-485 By: Holly Heilman

With this application and signed agreement, **furnish a map** showing location of the excavation, with the edge of asphalt, centerline of street, north arrow, and scale of drawing.

An **administrative fee** will be assessed, please see table below for additional information.

Encroachment Permit Step	Fee
Base Administrative Fee – No Engineering Bond (Bond for new public improvements not required)	\$200
Base Administrative Fee – Engineering Bond (Bond for new public improvements required)	\$325
Additional Fee for Engineering Review of Plans (per sheet, includes 2 reviews)*	\$150
Inspection Fee** (per acre, rounded up to next whole acre)	\$182.50

*An additional fee of \$75 per sheet per review may apply when additional reviews are required as a result of the applicant failing to address review comments or making revisions to the submitted plans not requested or required by City.

**Not required if paying review and inspection fees via a public improvements bond as calculated by the Engineering Department. Notwithstanding, bonds are required for all encroachment permits except when completed with a capital project or with a development/franchise agreement.

A **minimum bond amount of \$500.00** will be assessed to guarantee the repair of public improvements. For additional information on the bond please see section nine of the following excavation/encroachment agreement. Please use the calculations template below to figure the required bond.

Pavement Type:		Total Quantity		Total Cost
3" Asphalt w/ 6" UBC road base	SF		\$3.17	\$

Concrete:		Total Quantity		Total Cost
24" curb and gutter w/6" UBC road base	LF		\$23.00	\$
5" sidewalk w/ 6" UBC road base	SF		\$5.50	\$

Soft Surface Type (Shouldering):		Total Quantity		Total Cost
UBC road base	SF		\$1.15	\$

Landscaping Type:		Total Quantity		Total Cost
Turf/ Irrigation	SF		\$1.73	\$
Native	SF		\$1.15	\$

TOTAL BOND AMOUNT (total for all encroachments, if more than one cut): \$ _____

**** N O T E ****

GRANTEE MUST NOTIFY THE ASSIGNED INSPECTOR 24 HOURS IN ADVANCE BEFORE ANY WORK CAN PROCEED. CONTRACTOR SHALL HAVE THIS APPROVED PERMIT ON JOB SITE AT ALL TIMES. FAILURE TO DO SO MAY RESULT IN A CITATION.

To activate permit contact The Public Works Department, Phone: (801) 766-6506 or Fax: (801) 766-9872
Special Conditions / Instructions:

Must obtain UDOT encroachment permit.

NOTE: Applications will be subject to up to a **seven (7) business days** waiting period after the application has been submitted and signed by the Grantee.

- Submittal of **proof of insurance** and bond is required. Minimum limits listed below:
 - PROFESSIONAL LIABILITY, including ERRORS and OMISSION: \$2,000,000 combined single limit per occurrence. Limits apply to this service product individually.
 - GENERAL LIABILITY: \$1,000,000 combined single limit per occurrence, personal injury and property damage. 2,000,000 aggregate. Broad Form Commercial General Liability is required (ISO 1993 or better).
 - AUTOMOBILE LIABILITY: \$1,000,000 combined single limit "per accident" for bodily injury and property damage. "Any Auto" coverage is required.
 - WORKERS' COMPENSATION and EMPLOYERS LIABILITY: Workers' compensation statutory limits, as required by the Workers Compensation Act of the State of Utah, and Employers Liability limits set at a minimum of \$300,000 for each accident, disease, and employee. No officer or owner of any business or organization subject to the Workers' Compensation Act of the State of Utah may be excluded from this requirement.
 - EMPLOYMENT PRACTICES LIABILITY: \$1,000,000 per occurrence, \$1,000,000 aggregate. Required for employers subject to the provisions of Title VII of the Civil Rights Act and the Utah Antidiscrimination Act.
- The Grantee must **notify the following parties twenty-four (24) hours**, in advance, before any work is started:

- Public Works Department 801-766-6506
 - Alpine School District 801-610-8850 (Michelle Gray: Ext. 306 or mgray@alpinedistrict.org and Derek Farnes Ext.111 or derek@alpinedistrict.org)
 - Saratoga Springs Fire Department 801-766-6505
 - Saratoga Spring Police Department 801-766-6503
 - Utah Valley Police Dispatch 801-794-3970
 - Republic Services 801-785-5935
- All signage shall be in accordance with the Manual on Uniform Traffic Control Devices (MUTCD) and a **Traffic Control Plan**, prepared by a Certified Traffic Control Technician, must be attached.

Grantee is **required** to consult utility companies operating in this area before making any excavation and must call **Blue Stakes 1-800-662-4111**. In granting this permit, City of Saratoga Springs makes no representation as to the location of utility facilities in the area to be excavated or the effect of the permitted excavation on said utilities. If installing City-owned infrastructure, Grantee or Contractor **must** provide the City with as-builts. By signing below, I have read and accept the terms of this permit.

Grantee's Signature: *J. Branch Cox* Date: 12/13/17

CITY OFFICE USE ONLY

Fee computation:

Base Fee	1	x	\$200 or \$325	=	
# Sheets for 2 reviews		x	\$150	=	
# Acres		x	\$182.50	=	
Total Due:					

Fee Received: Amount \$ _____ Receipt No. _____ By: _____

Bond Amount Verified: \$ 15,507.25 ^{ENCROACHMENT} _{performance bond} By: N/A

Bond Received: Receipt No. N/A _{performance warranty} By: N/A

No Fees or Bond Needed By: HRB

Employment Practices Liability needed: Yes No

Determined by: HRB ^{development} _{immov. div.}

Professional Liability: Yes No

Determined by: HRB

Proof of Insurance Received (attached or filed)

Approved by: HRB

Traffic Control Plan Received (must be attached)

*Approved by: [Signature]

Project plans to Engineering

Approved by: [Signature]

Inspector Assigned: Chris Carman Phone: 801-592-6871

*Permit Approved by: [Signature] Date: 12-19-17

*By approving the attached traffic control plan, the City does not accept liability for its compliance to MUTCD standards.

Inspections Done After 1 Year of Completion

Patch Inspection Completed: By: _____ Date: _____

As-builts, if required By: _____ Date: _____

Bond Release Issued Date: By: _____ Date: _____



Saratoga Springs Bond Calculation

Project: Quick Quack Car Wash

By: Ron McGhin

Date: 12Jul2017

Earthwork

Earthwork Description	Unit	Quantity	Cost per Unit	Total Cost
Clear and Grub Site	ACRE	0.98	\$2,875.00	\$2,817.50
Subtotal				\$2,817.50

Erosion Control

Erosion Control Description	Unit	Quantity	Cost per Unit	Total Cost
Erosion Control*	Acre	0.98	\$2,875.00	\$2,817.50
Subtotal				\$2,817.50

* Erosion control bond funds shall be eligible for release only after the City inspector has determined that the site is stabilized and all construction activity has been completed.

Sanitary Sewer

Sanitary Sewer Description	Unit	Quantity	Cost per Unit	Total Cost
Laterals	EA	1	\$862.50	\$862.50
Subtotal				\$862.50

Culinary Water

Culinary Water Description	Unit	Quantity	Cost per Unit	Total Cost
Service Connections 2" with Meter	EA	1	\$2,875.00	\$2,875.00
Subtotal				\$2,875.00

Irrigation Water

Irrigation Water Description	Unit	Quantity	Cost per Unit	Total Cost
Irrigation Lateral 3/4-1" with Meter	EA	1	\$1,150.00	\$1,150.00
Subtotal				\$1,150.00

Storm Drain & Land Drain

Storm Drain Description	Unit	Quantity	Cost per Unit	Total Cost
Connect to existing SDMH	EA	1	\$3,000.00	\$3,000.00
Subtotal				\$3,000.00

Street Improvements

Street Improvements Description	Unit	Quantity	Cost per Unit	Total Cost
Subtotal				\$0.00

* Denotes exception may be granted if weather prohibits paving

Miscellaneous

Miscellaneous Description	Unit	Quantity	Cost per Unit	Total Cost
As-Builts	EA	1	\$575.00	\$575.00
Subtotal				\$575.00

Total Improvement Cost				\$14,097.50
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CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

10/26/2017

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must have ADDITIONAL INSURED provisions or be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER UNITEL 1128 Lincoln Mall Suite 200 Lincoln, NE 68508	CONTACT NAME: UNITEL PHONE (A/C, No, Ext): 402-434-7255 E-MAIL ADDRESS: FAX (A/C, No): 402-434-7272
	INSURER(S) AFFORDING COVERAGE INSURER A : National Farmers Union P&C INSURER B : Hartford Insurance Company INSURER C : INSURER D : INSURER E : INSURER F :
INSURED Central Utah Telephone, Inc. PO Box 7 Fairview UT 84629	

COVERAGES

CERTIFICATE NUMBER: 38531767

REVISION NUMBER:

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL SUBR INSD WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS	
A	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER:		1RU0475816	11/1/2017	11/1/2018	EACH OCCURRENCE	\$1,000,000
						DAMAGE TO RENTED PREMISES (Ea occurrence)	\$2,000,000
						MED EXP (Any one person)	\$5,000
						PERSONAL & ADV INJURY	\$1,000,000
						GENERAL AGGREGATE	\$NONE
						PRODUCTS - COMP/OP AGG	\$2,000,000
							\$
A	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input checked="" type="checkbox"/> OWNED AUTOS ONLY <input checked="" type="checkbox"/> SCHEDULED AUTOS <input checked="" type="checkbox"/> HIRED AUTOS ONLY <input checked="" type="checkbox"/> NON-OWNED AUTOS ONLY		1RU0475816	11/1/2017	11/1/2018	COMBINED SINGLE LIMIT (Ea accident)	\$1,000,000
						BODILY INJURY (Per person)	\$
						BODILY INJURY (Per accident)	\$
						PROPERTY DAMAGE (Per accident)	\$
							\$
A	<input type="checkbox"/> UMBRELLA LIAB <input checked="" type="checkbox"/> OCCUR <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE <input type="checkbox"/> DED <input checked="" type="checkbox"/> RETENTION \$ 10,000		1CB0475817	11/1/2017	11/1/2018	EACH OCCURRENCE	\$20,000,000
						AGGREGATE	\$20,000,000
							\$
B	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	Y/N <input type="checkbox"/> N/A	91WEAA7MVQ	11/1/2017	11/1/2018	<input checked="" type="checkbox"/> PER STATUTE <input type="checkbox"/> OTH-ER	
						E L EACH ACCIDENT	\$500,000
						E L DISEASE - EA EMPLOYEE	\$500,000
						E L DISEASE - POLICY LIMIT	\$500,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

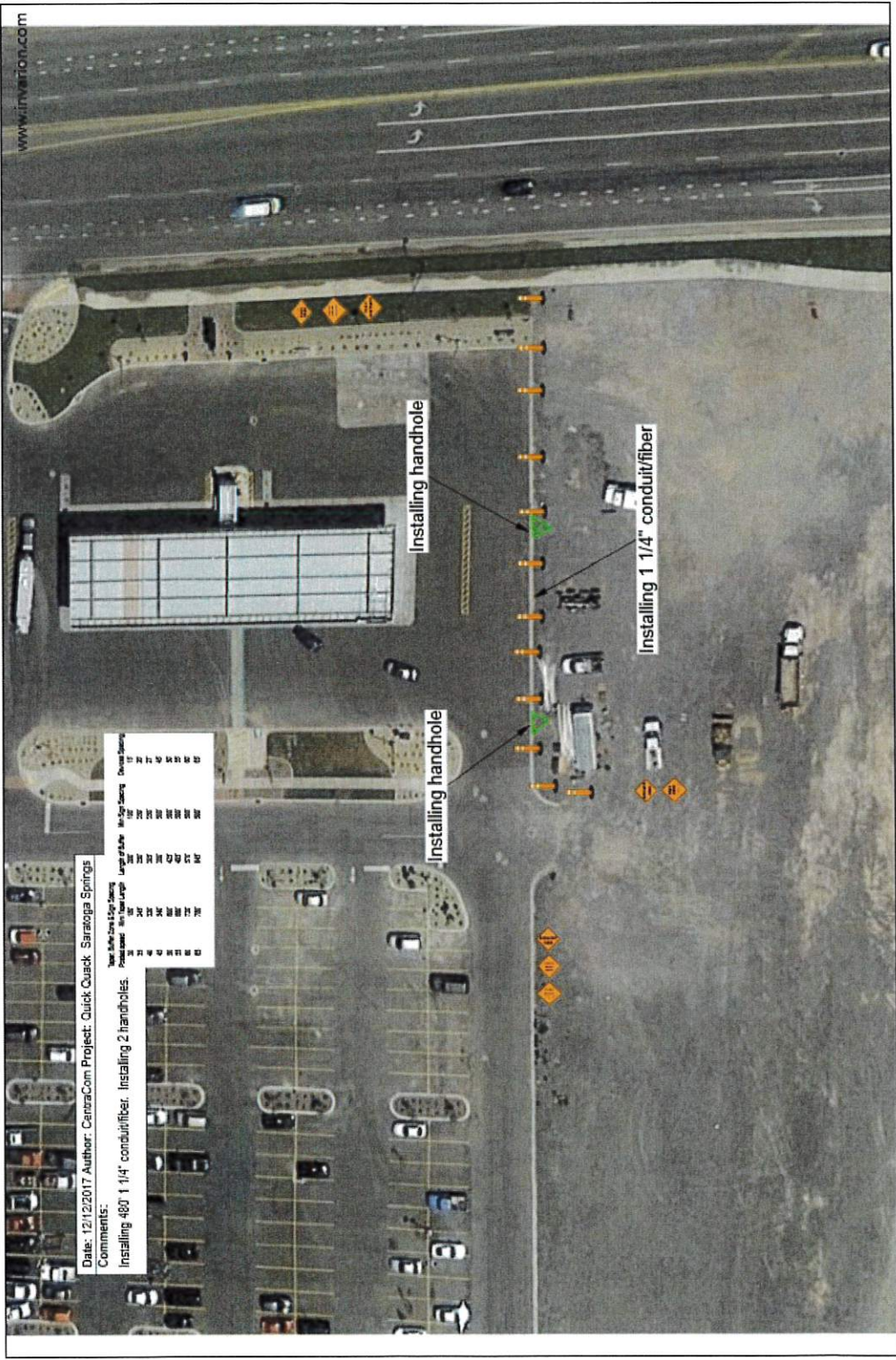
CERTIFICATE HOLDER**CANCELLATION**

Saratoga Springs City 1307 N Commerce Drive Ste 200 Saratoga Springs UT 84045	SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS. AUTHORIZED REPRESENTATIVE (LIN) Ric Stoakes <i>R Stoakes</i>
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ACORD 25 (2016/03)

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Date: 12/12/2017 Author: CentraCom Project: Quick Quack, Saratoga Springs

Comments: Installing 480 1 1/4" conduit/fiber. Installing 2 handholes.

Start	End	Length	Material	Notes
1	2	100	480 1 1/4" conduit	Handhole
3	4	100	480 1 1/4" conduit	Handhole
5	6	100	480 1 1/4" conduit	Handhole
7	8	100	480 1 1/4" conduit	Handhole
9	10	100	480 1 1/4" conduit	Handhole
11	12	100	480 1 1/4" conduit	Handhole
13	14	100	480 1 1/4" conduit	Handhole
15	16	100	480 1 1/4" conduit	Handhole
17	18	100	480 1 1/4" conduit	Handhole
19	20	100	480 1 1/4" conduit	Handhole
21	22	100	480 1 1/4" conduit	Handhole
23	24	100	480 1 1/4" conduit	Handhole
25	26	100	480 1 1/4" conduit	Handhole
27	28	100	480 1 1/4" conduit	Handhole
29	30	100	480 1 1/4" conduit	Handhole
31	32	100	480 1 1/4" conduit	Handhole
33	34	100	480 1 1/4" conduit	Handhole
35	36	100	480 1 1/4" conduit	Handhole
37	38	100	480 1 1/4" conduit	Handhole
39	40	100	480 1 1/4" conduit	Handhole
41	42	100	480 1 1/4" conduit	Handhole
43	44	100	480 1 1/4" conduit	Handhole
45	46	100	480 1 1/4" conduit	Handhole
47	48	100	480 1 1/4" conduit	Handhole
49	50	100	480 1 1/4" conduit	Handhole
51	52	100	480 1 1/4" conduit	Handhole
53	54	100	480 1 1/4" conduit	Handhole
55	56	100	480 1 1/4" conduit	Handhole
57	58	100	480 1 1/4" conduit	Handhole
59	60	100	480 1 1/4" conduit	Handhole
61	62	100	480 1 1/4" conduit	Handhole
63	64	100	480 1 1/4" conduit	Handhole
65	66	100	480 1 1/4" conduit	Handhole
67	68	100	480 1 1/4" conduit	Handhole
69	70	100	480 1 1/4" conduit	Handhole
71	72	100	480 1 1/4" conduit	Handhole
73	74	100	480 1 1/4" conduit	Handhole
75	76	100	480 1 1/4" conduit	Handhole
77	78	100	480 1 1/4" conduit	Handhole
79	80	100	480 1 1/4" conduit	Handhole
81	82	100	480 1 1/4" conduit	Handhole
83	84	100	480 1 1/4" conduit	Handhole
85	86	100	480 1 1/4" conduit	Handhole
87	88	100	480 1 1/4" conduit	Handhole
89	90	100	480 1 1/4" conduit	Handhole
91	92	100	480 1 1/4" conduit	Handhole
93	94	100	480 1 1/4" conduit	Handhole
95	96	100	480 1 1/4" conduit	Handhole
97	98	100	480 1 1/4" conduit	Handhole
99	100	100	480 1 1/4" conduit	Handhole

Installing handhole

Installing handhole

Installing 1 1/4" conduit/fiber

144 FIBER IN
EXISTING UDDT
CONDUIT (1D)

PROPOSED
1.25" CONDUIT

Redwood Rd (SR 68)

PROPOSED
HANDHOLE

270'
209'



QUICK QUACK
CAR WASH
66 W PIONEER CROSSING

Pioneer Crossing (SR 145)

R23'

EXISTING HANDHOLE
UDDT HANDHOLE

(MILEPOST)

31.7

Pioneer

0.0

48 FIBER

CentraCom, MC17922: Proposed conduit path to Quick Quack Car Wash, 66 W Pioneer Crossing.
Accessing existing handhole at milepost 31.7 Redwood Road (SR 68).

