

# UTILITY MAJOR PERMIT SUBMITTAL MATERIAL TRANSMITTAL FORM

This form must accompany **ALL** the required Utility Major materials listed below at the time of submittal to the SDOT Street Use Counter.

Project Address \_\_\_\_\_

Materials Submitted by \_\_\_\_\_  
(Sign and Print Name)

Utility Major Permit # \_\_\_\_\_

(For Official Use Only)

**DATE STAMP HERE**

Utility Major Permit Submittal Requirements	
<input type="checkbox"/> Utility Permit Application (if not previously submitted) <input type="checkbox"/> Utility and Pavement Restoration Checklist (if not previously submitted) <input type="checkbox"/> Site Photos (if not previously submitted)	<input type="checkbox"/> 3 Paper Copies of Utility Major and Restoration Plans <input type="checkbox"/> 3 Paper Copies of Profile (if required) <input type="checkbox"/> 2 Paper Copies of Traffic Control Plan (if required) <input type="checkbox"/> 2 Paper Copies of the Phase Schedule Manager <input type="checkbox"/> 2 Paper Copies of the Work Zone Site Plan <input type="checkbox"/> 2 Paper Copies of the Pedestrian Mobility In and Around Work Zones Checklist
<b>Required Electronic Material Submittals:</b> <input type="checkbox"/> 1 Electronic file of all required documents	
Other Submittal Materials <input type="checkbox"/> _____	<input type="checkbox"/> _____

(SDOT Street Use Staff to Fill Out Bottom Portion of Form)

## STREET USE - RECEIPT OF DOCUMENTS

Utility Major Permit # \_\_\_\_\_ Project Address \_\_\_\_\_

<input type="checkbox"/> Utility Permit Application <input type="checkbox"/> Utility and Pavement Restoration Checklist <input type="checkbox"/> Site Photos <input type="checkbox"/> 3 Paper Copies of _____% Plans <input type="checkbox"/> 3 Paper Copies of _____% Profile <input type="checkbox"/> 3 Paper Copies of _____% Restoration Plans <input type="checkbox"/> 2 Paper Copies of Traffic Control Plan <input type="checkbox"/> 2 Paper Copies of Phase Schedule Manager <input type="checkbox"/> 2 Paper Copies of Work Zone Site Plan <input type="checkbox"/> 2 Paper Copies of Pedestrian Mobility In and Around Work Zones Checklist <input type="checkbox"/> Other Submitted Materials	
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**DATE STAMP HERE**