

**CITY OF BONDURANT
SIDEWALK PERMIT**

Application No. _____

Date: _____

The applicant agrees to comply with the attached Sidewalk Requirements. Compliance shall be determined by the sole discretion of the City, as deemed necessary to promote public health, safety, and the general welfare. These requirements shall apply unless waived in writing by the City prior to installation.

Applicant Name: _____

Street Address: _____

City, State, Zip Code: _____

Telephone Number: _____

Contact Person: _____

Location of Work: _____

I hereby acknowledge that I have read this permit and state that the above information is correct. I agree to comply with all City of Bondurant requirements regarding installation of sidewalks

Signature: _____

Sidewalk Permit Fee: _____ Receipt No. _____

Issued By _____ Date _____

Inspections:

Forms & grade _____
Public Works Staff _____ Date _____

Final _____
Public Works Staff _____ Date _____