

**ARLINGTON COUNTY, VIRGINIA**  
**DEPARTMENT OF ENVIRONMENTAL SERVICES**  
**DIVISION OF TRANSPORTATION**  
**2100 Clarendon Boulevard, Suite 800**  
**Arlington, Virginia 22201**  
**703-228-3629**  
[www.arlingtonva.us](http://www.arlingtonva.us)

**APPLICATION FOR PUBLIC RIGHT-OF-WAY PERMIT**

**ALL APPLICANTS MUST COMPLETE ITEMS 1 THRU 26:**

<b>Application Information (Office Use Only)</b>	Permit No.	Application Date	
<b>Applicant Information</b>	1. Individual or Company Full Legal Name (if applicable)		
	2. Name of Representative (First, Middle Initial, Last)	3. Title of Representative	
	4. Telephone No.	5. Cellular Phone No.	6. Fax No.
	7. Address	8. City, State, Zip Code	
	9. State Contractor's License No.	10. Arlington Business License No.	
<b>Owner of Real Property Served by Work (if applicable)</b>	11. Name	12. Telephone No.	
	13. Property Address	14. City, State, Zip Code	

15. **Street Name & Address (Exact location of proposed Work or Activity):** \_\_\_\_\_

16. **Nearest Cross Streets:** Between \_\_\_\_\_ and \_\_\_\_\_

17. **Purpose of Work or Activity:**

Construction       Demolition       Excavation       Other \_\_\_\_\_

18. **Description of facility: (Check all applicable)**

Conduit       Fiber Optic       Test Hole       Other \_\_\_\_\_  
 Curb & Gutter       Guy Wire Installation       Tree Planting/Landscaping  
 Driveway       Overhead Wire       Utility Pole Relocation  
 Emergency Work       Sidewalk       Water/Sewer Service Connection

19. **Full Description of Work, Activity or Use of Public Right-of-Way ("Work") and Purpose of the Work:** \_\_\_\_\_

20. **Number of Calendar Days Needed to Complete Work after Permit Issuance Date:** \_\_\_\_\_

I hereby certify that: I have the full authority to make the foregoing Application as, or on behalf of, the Applicant; the information in this Application and the required submittals are complete and correct; the Work and facilities to be installed shall comply with all laws of the Commonwealth of Virginia, and all ordinances, rules, regulations, policies, and special conditions of the County and of the County Board of Arlington County, Virginia.

21. **Signature of Applicant:** \_\_\_\_\_ 22. **Date:** \_\_\_\_\_

23. **Print Name:** \_\_\_\_\_ 24. **Telephone No.:** \_\_\_\_\_

25. **Company Full Legal Name (if applicable):** \_\_\_\_\_ 26. **Title of Representative:** \_\_\_\_\_

**Application shall be accompanied by payment of basic permit fee. Payment of the balance of the fee charges shall be made before the release of the Permit.**

**Required Coordination, Notifications and/or Scheduling after permit issuance and before commencing ANY Excavation, Demolition, Construction and/or Work:**

**72-hour Notification Prior to Digging in ROW**

- Call the Department of Parks, Recreation & Cultural Resources at 703-228-6525.
- Call Miss Utility at 800-552-7001 (§ 56-265.14 et. seq. Code of Virginia, Underground Utility Damage Prevention Act).

**24-hour Notification for Scheduling ROW Inspections**

- Call DES Inspections at 703-228-0760.