

**APPLICATION TO
CONSTRUCT or REQUEST WORK
IN THE RM OF STANLEY**



Project# _____

Applicant Name _____ Company Name (If applicable) _____

Mailing Address _____

Postal Code _____ Telephone No. (H) _____ (C) _____

Fax No. _____ E-Mail _____

Fill out only what applies:

Who will be completing the work: Applicant Requesting RM to complete work

Proposed work is located on: Private property only Municipal Right of Way only Both

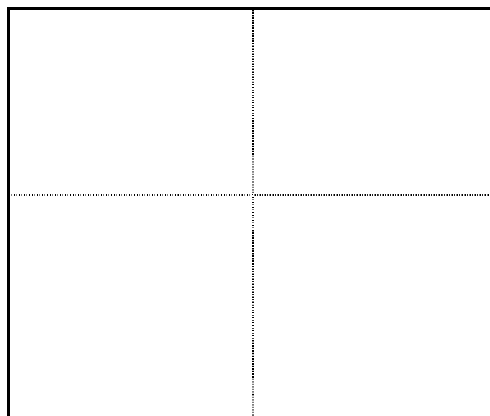
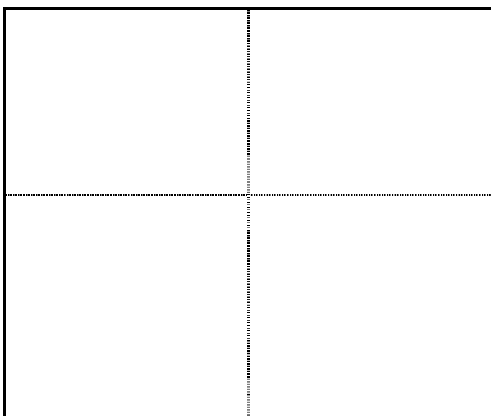
Land Description: _____
i.e. NE-22-02-04W

Location of work proposed: _____
i.e. Road 28, South of Road 12 in West ditch

Please provide details in description and/or sketch that apply:

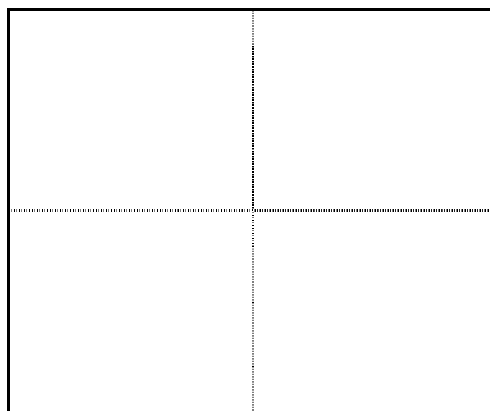
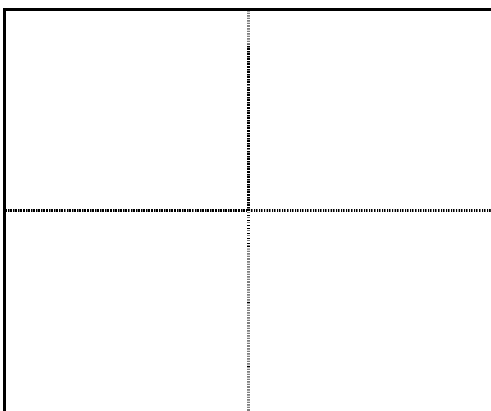
- Full description of work/issue (Ditch work, Culvert install/repair, Pipe install, Road crossing etc.)
- Method of construction (Surface excavation, Trench, Road cut, Directional push, etc.)
- Land and Road descriptions.
- Full details on facilities proposed. (Type, location, depth, length, size, etc.)
- Measures taken for erosion control.
- Indicate direction of water flow.
- # acres of land proposed to be drained.

Description:



Sketch/Map

Attached



Date work is planned for: _____

Estimated hours required to complete the project: _____

Name of individual/contractor completing the work: _____

A Survey & Aerial Photo must be attached to all ditch excavation work in the municipal right of way unless assistance provided by the RM of Stanley

Survey Must Include:

- 1) Existing & proposed ditch bottom profile.
- 2) Culvert - location, elevation, type, size
- 3) Cross section (if requested by the Municipality)
- 4) Drain tile outlets - location, elevation (Coordinates preferred)
- 5) North arrow
- 6) Land description

Signature of Applicant

Print Name

Date _____

RM of Stanley

Office:

Ph: 325-4101, Fax: 325-4008 Email: dthiessen@rmofstanley.ca Website: rmofstanley.ca

Public Works:

Ph: 325-8925, Fax: 331-4067 Email: publicworks@rmofstanley.ca

THIS SECTION TO BE COMPLETED BY RM

Received By: _____

Date Received: _____

Date Reviewed: _____

- Application forwarded to Council/Committee
- Approved: Date: _____

RM Comments / Details:

