CONTRACTOR'S HAUL ROUTE APPLICATION

In accordance with the City Charter we ask that you provide the following information about the proposed haul routes for your project. We will send you a written confirmation that these routes are acceptable to the City or an alternate within a week.

Work Site: ________________________________________________________________

Dates when work is scheduled: _____________________________________________

Disposal Site for Excess Material: ___________________________________________

Route proposed for this trucking: (enclose map or sketch on back)

Source of Material: (Granular, Blacktop etc.): _________________________________

Route proposed for this trucking: (enclose map or sketch on back)

Contractor's Name: ________________________________________________________

Signature: _______________________________________________________________

Date: _________________________________

Thank you for your cooperation in this matter. If you have any questions about the nearest truck routes, please call the Engineering Division at the number above.

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Approved: _________________________________

Date: __________________________

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