SPECIAL CONDITIONS FOR 136 PERMIT

1. All work must be done in accordance with approved plans.
2. All disturbed areas within the right-of-way are to be restored to their original condition.
3. The work authorized by this permit shall be performed under the supervision and to the satisfaction of the County Superintendent of Highways or his/her representative.
4. A security deposit of ___________, is required for _______________________.
5. The curb shall be removed of its entirety and a driveway shall be installed as per driveway installation detail.
6. Comply with attached details:
   a. Driveway Installation with curb/gutter
   b. Frame & Grate Anchors
   c. Driveway Standards
   d. Pavement Restoration
   e. Pavement Restoration
   f. Ditch Enclosure
   g. Asphalt Shoulder Replacement
   h. See Plan
   i. Temporary Access
7. Install ______ inch perforated CMP or PE culvert with end sections; culvert must extend 10’ beyond edge of driveway.
8. A sag vertical curve is required in the driveway.
9. Maintain existing drainage away from the roadway.
10. The highway must be kept clean of mud, dirt and other debris at all times.
11. A minimum of 3” of compacted temporary pavement must be placed in all approved road cuts until permanent pavement can be installed. The temporary pavement must be maintained by the permittee until permanent pavement is placed. The permittee is to maintain the road cut until such time the highway is reconstructed.
12. The proposed culvert invert elevations shall be on a grade line that is between the upstream and downstream adjacent property culverts and/or cross culvert invert elevations.
13. Two way traffic shall be maintained by the permittee on this section of the highway while the work is in progress and until it’s final completion. All maintenance and protection of traffic shall be performed as directed by the N.Y.S. Manual of Uniform Traffic Control Devices, latest revision.
14. Permittee must notify M.C.D.O.T. Permit Office (Phone # __________) at least 48 hours prior to performing any work within the County right-of-way.
15. Other
   ____________________________________________________________
   ____________________________________________________________
16. Prior to beginning any work within the County right-of-way, the permittee or their representative must schedule a meeting with our Permit and Highway Operations representatives to develop and implement a maintenance and protection of traffic plan. A maintenance and protection sketch or plan may be required upon request.
17. A letter of notification of the start of construction must be sent to all affected residents at least two (2) weeks in advance of the start of construction. The County Superintendent of Highways must be sent a copy of this letter.
18. All work must be done under the supervision and approval of the Resident Engineer of this project.
19. A revised traffic impact report is required for future phases of this development. Any mitigating measures from this study must be installed by the developer.
20. Mitigating measures (geometrics, traffic signal, etc.) are required at a later phase of this development.
21. If future County projects on ____________________ necessitate use of the right-of-way occupied by your facility, these facilities must be relocated at the owners expense.
22. All sites should be seeded and stabilized with erosion control materials, such as straw, mulch, jute mesh, or excelsior within 15 days of final grading. If construction has been suspended, or sections completed, areas should be seeded immediately and stabilized with erosion control materials. Maintenance should be performed as necessary to ensure continued stabilization.
23. An as built record drawing will be required.
24. All materials installed in the County right-of-way shall be in accordance with the Monroe County Department of Transportation Standard Specifications and Details in effect when installed.
HIGHWAY PERMIT FIELD REPORT

Permittee Telephone Number: ______________________

Date: ______________

Contractor's Name: _________________________________________

Contractor's Telephone Number: ____________________

Report By: ___________________________

Date Completed : ______________________

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