

CITY AND COUNTY OF BROOMFIELD DEPARTMENT OF PUBLIC WORKS / PARKS DIVISION APPLICATION FOR ACCESS PERMIT

An access permit is required any time permission is needed to cross City & County of Broomfield greenbelt s, parks or open space areas.

TERMS OF CONDITIONS

- 1. The application is to be filled out by the responsible person contractor/homeowner person doing the work.
- 2. Contractor/homeowner is responsible for all utility locates and any damage to the area that is accessed.
- 3. All repairs must meet current City & County of Broomfield Standards and Specifications. City & County of Broomfield may require repairs to be made by a qualified individual or contractor.
- 4. Access permit must be acquired and granted 48 hours before any work may begin and check list is completed.
- 5. There are no fees for Access Permit.

RETURN COMPLETED FORMS TO:

City & County of Broomfield, Field Services 3001 W. 124th Avenue Broomfield, CO. 80020 (303) 438 – 6334

CITY AND COUNTY OF BROOMFIELD DEPARTMENT OF PUBLIC WORKS / PARKS DIVISION APPLICATION FOR ACCESS PERMIT

Applicant Name:	
Address:	
Phone Number:	Work Number:
Address/Location of Access Point:	
Contractor Name:	
Address:	
Phone Number:	Cell Number:
Date(s) Permit is needed:	
Purpose for Crossing City and County of Broomfield Property:	
List All Type of Equipment Being Used:	
	ACCESS PERMIT
Access as Described Above Is: Approved [] Denied []	
Special Conditions or Comments:	
	
Director of Public Works or Designee	Date

CITY AND COUNTY OF BROOMFIELD DEPARTMENT OF PUBLIC WORKS / PARKS DIVISION ACCESS PERMIT CHECK LIST

The attached Access Permit Checklist and Access Permit Conditions are incorporated into this permit. Location of Job: _____ Items To Check Before Access Is Granted: Turf Damage: Curb & Gutter Damage: Yes [] No [] Comment:______ Yes [] No [] Comment:______ Tree Damage: Fence Damage: Yes [] No [] Comment:_______ Other Damage: Yes [] No [] Comment:______ Homeowner/Contractor: _____ Signature Date Inspected By: _____ Signature Date Title Pictures Taken: Yes [] No [] Comment On Area After Repairs Are Completed: ______ Reported By: _____ Signature Date Title