

E4 - RIGHT OF ENTRY (ROE) APPLICATION

Date: _____

A detailed scope of work, site maps, drawings and certificate of insurance in accordance with City of Detroit requirements are required in order to process the permit.

Property Address(es): _____

City: _____ State: _____ Zip: _____

Cross Streets/Boundaries: _____

List all additional properties addresses as an attachment or on the back of this page.

Project Name: _____

Type of ROE Request (check one): Parcel of Land Extension/Modification for Parcel
 Right-Of-Way (R-O-W) Extension/Modification for R-O-W

APPLICANT CONTACT INFORMATION

Contact Person: _____

Company Name: _____

Phone: _____ Email: _____

Address: _____

City: _____ State: _____ Zip: _____

PROPERTY INFORMATION

Is Site City owned or controlled: Yes No Are the structure(s) on the property? Yes No

If there are structure(s) on the property, provide number and type _____

PERMIT INFORMATION

Timeline for access (dd/mm/yyyy): Start Date: _____ End Date: _____

Insurance Policy Expiration Date: _____

Are monitoring wells being installed in the R-O-W?: Yes No

If Yes: Less than 30 days (Temporary) More than 30 days (Permanent-Requires City Council Approval)

Type of Activities: Soil Excavations Temporary Staging Soil Borings: # of Borings _____

Well Installation: # of Wells _____ Other: _____

Is a site inspection being requested: Yes No

Are additional copies of the permit being requested: Yes, # of copies _____ No

Applicant's Signature: _____ Date: _____

Make checks payable to: **"Treasurer City of Detroit"** ROE Permit #: _____

Total Fee: _____

This application can also be completed online.
Visit detroitmi.gov/bseed/elaps
for more information.

