The Open Space Temporary Access Permit Application is the process by which the Town of Superior grants access to cross any greenbelt, park, or open space in the community. A complete permit and fee must be submitted to Town of Superior Town Hall prior to construction.

**Procedures:**

1. The Homeowner/Contractor is responsible for all utility locates and any damage to utilities in the accessed area. Locates can be received by calling UNCC at 1-800-922-1987.

2. The completed application shall be returned to Town Hall at least one week before requested date(s). A $25/permit fee and utility locate tracking number shall accompany the application.

3. A pre inspection will be scheduled within a week of the application date. The pre inspection will consist of items identified on page three (3) of this packet.

4. The access permit will be approved or denied based upon the findings in the pre inspection. The Homeowner/Contractor will be notified of the permit status by phone, within three business days.

5. If access is granted, the Homeowner/Contractor must pay a $1,000 damage deposit prior to initiating work.

6. The Homeowner/Contractor shall notify the Parks, Recreation, and Open Space office at least 48 hours prior to completion of work for final inspection.

7. After final inspection, the accessed area will be inspected for damages. If no damage has occurred the $1,000 deposit will be refunded in full.

8. If damage has occurred, Homeowner/Contractor will be given a reasonable time to rectify the damages. If repairs are not made, or are deemed unsatisfactory, the Town reserves the right to make repairs using funds from the damage deposit. Repairs in excess of $1,000 will become the responsibility of the Homeowner.

9. Damage deposit refunds will be sent in the form of a check by mail to the applicant’s address.
Applicant Information

Applicant Name_________________________________________ Date_________________
Address ______________________________________________________________________
Phone __________________________________ Fax _________________________________
Address/ Location of Access ___________________________________________________
Contractor ___________________________________ Contact Name ___________________
Address ______________________________________________________________________
Contact Phone: Home ____________________ Work _______________________________
Purpose for Access _______________________________________________________________________
Type of Equipment to be used _______________________________________________________
Dates __________________________/_________________________ to __________________________/_________________________

Applicable Fees

Administrative Fee =$ 25.00 Ck #__________ Date ___________
Deposit =$ 1000.00 Ck#____________ Date ___________

Access Permit

Access as Described Above is

_____Approved  _____Denied

Special Conditions________________________________ Reason for Denial_________________________
____________________________________________________________________________________

Waiver of Liability

I have read and fully agree with and accept all responsibility for the terms and conditions of this permit. I certify that all
information provided in this Use Permit agreement is true and complete. I understand that false information or omission
thereof may result in the termination of this and any other Town of Superior facility use agreements. I further certify that I
have read, understand, will abide by, and will communicate to all individual users, all policies, rules, and regulations as stated
herein.

Applicant Printed Name: _________________________________
Applicant Signature _____________________________________ Date ______

Office Use Only

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<th>Date Received:</th>
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<tr>
<td>Date Pre Inspection:</td>
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<td>Date Post Inspection:</td>
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# Internal Use Only

## Information

Homeowners Name: ________________________________

Address: _______________________________________

Phone: ________________________________________

Date Completed: ___________

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<th>After Yes</th>
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Additional Notes:

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