



STEPHANIE RAWLINGS-BLAKE
MAYOR

APPLICATION FOR TEMPORARY USE OF A RIGHT OF WAY

DEPARTMENT OF GENERAL SERVICES
PERMITS OFFICE

200 Holliday Street, Room 204
Baltimore, Maryland 21202

410-396-4508 • ROW.permit.documents@baltimorecity.gov

BALTIMORE CITY



THEODORE ATWOOD
DIRECTOR

PLEASE PRINT OR TYPE INFORMATION

Contact Information

Applicant Name	Contractor Name
Applicant Phone	Contractor Phone
Applicant Address	Contractor Address

TYPE OF PERMIT

- | | | |
|--|---|---------------------------------------|
| <input type="checkbox"/> Alley closure | <input type="checkbox"/> Street closure | <input type="checkbox"/> Test Pit |
| <input type="checkbox"/> Dumpster | <input type="checkbox"/> Film equipment | <input type="checkbox"/> Utility |
| <input type="checkbox"/> Curb repair | <input type="checkbox"/> Footway | <input type="checkbox"/> Other: _____ |
| <input type="checkbox"/> Curb lane | <input type="checkbox"/> Plumbing | |
| <input type="checkbox"/> Fence | <input type="checkbox"/> Scaffolding | |

Location (Address of adjacent property and/or distance and direction from nearest intersecting street)		
Reason for Use		
Start Date/Time	End Date/Time	Sketch Attached? <input type="checkbox"/> Yes <input type="checkbox"/> No

Parking Meter Numbers			Related Approvals	
			Developer's Agreement	Right of Entry
			City Contract #	H.C.D. Permit #
			Other	
Special Conditions				

I declare under penalties of perjury that this application, including any accompanying plans, specifications, etc., has been examined by myself and to the best of my knowledge and belief is a true, correct, and complete statement of the work to be covered by this application.

X _____ X _____ X _____
Signature (Required) Print Name (Required) Date

↓ FOR OFFICE USE ONLY. PLEASE DO NOT WRITE IN THIS SECTION. ↓

Date Received	Received By
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