



Land Use Permit Application (LUP-A)

APPLICATION is hereby made for permit as shown on the accompanying plan or sketch and as described below. Said activity(s) will be done under and in accordance with the rules and regulations of the Commonwealth Transportation Board of Virginia, in so far as said rules are applicable thereto and any agreement between the parties herein before referred to. Where applicable agreements may be attached and made a part of the permit assembly including any cost responsibilities covering work under permit. Applicant agrees to maintain work in a manner as approved upon its completion. Applicant also hereby agrees and is bound and held responsible to the owner for any and all damages to any other installations already in place as a result of work covered by resulting permit. Applicants to whom permits are issued shall at all times indemnify and save harmless the Commonwealth Transportation Board members of the Board, the Commonwealth and all Commonwealth employees, agents, and offices, from responsibility, damage, or liability arising from the exercise of the privileges granted in such permit to the extent allowed by law. In consideration of the issuance of a permit the applicant agrees to waive for itself, successors in interest or assigns any entitlements it may otherwise have or have hereafter under the Uniform Relocation and Assistant Act of 1972 as amended in event the Department or its successor, chooses to exercise its acknowledged right to demand or cause the removal of any or all fixtures, personality of whatever kind or description that may hereafter be located, should this application be approved.

Applicant information:

Driver's License or Tax ID No. _____

Owner Name _____

Address _____

City _____ State _____ Zip Code _____

Contact Name _____

E-mail Address _____

Telephone Number _____

Emergency Telephone Number _____

Fax Number _____

Agent information:

Driver's License or Tax ID No. _____

Owner Name _____

Address _____

City _____ State _____ Zip Code _____

Contact Name _____

E-mail Address _____

Telephone Number _____

Emergency Telephone Number _____

Fax Number _____

Permit Term Requested _____ Fees Enclosed \$ _____ Check Number _____ Money Order _____

Estimated cost of work to be performed on VDOT Right of Way \$ _____

Surety Information:Surety Posted by ☐ Owner ☐ Agent ☐ County Resolution ☐

Waived Bonding Company Name _____

Bond # _____

Irrevocable Letter of Credit - Bank Name _____ Irrevocable Letter of Credit # _____

Surety paid by Check - Check Number _____

If cash/check surety is posted, please complete
Commonwealth of Virginia's Substitute Form W-9.

Amount of Surety \$ _____ Obligation Amount \$ _____

Request permission to perform the following activity(s): _____

_____ as per attached plans.

Location: ☐ County ☐ Town ☐ City of _____ Route No. _____ Street Name _____

Between Route No. _____ Street Name _____ and Route No. _____ Street Name _____

Latitude _____ Longitude _____ Tax Map Number _____ Applicant Job No. _____

Applicant shall provide proof of registration as an operator with the appropriate notification center in accordance as defined in §2.2-1151.1 of the Code of Virginia & must provide a notarized affidavit, stating that the utility owner has notified the commercial and residential developer, owner of commercial or multifamily real estate, or local government entities with a property interest in any parcel of land located adjacent to the property over which the land use is being requested, that application for the permit has been made.

☐ IF APPLICABLE, I AGREE TO PAY THE FULL SALARY AND EXPENSES OF A STATE ASSIGNED INSPECTOR IN CONJUNCTION WITH ACTIVITIES AUTHORIZED UNDER THE AUSPICES OF A VDOT LAND USE PERMIT. By signing below, I acknowledge that I am fully cognizant of all the LUP-SPG requirements associated with the issuance of a VDOT Land Use Permit.

The permittee or their agent must contact the VDOT Customer Service Center at 1-800-367-7623 a minimum of 48 hours prior to initiating any planned excavation within 1,000 feet of a signalized intersection and/or near VDOT ITS infrastructure.

Signature of Applicant: _____ Title _____ Date _____

Signature of Agent: _____ Title _____ Date _____

All applicable items on this form must be completed to avoid delay in processing the issuance of a VDOT Land Use Permit.
Prepayment required with remittance payable to Virginia Department of Transportation.

VDOT USE ONLY

Receipt is hereby acknowledged for: CHECK No.: _____ MONEY ORDER No.: _____

In the Amount of \$ _____ for PERMIT FEE \$ _____ CASH SURETY \$ _____

Authorized VDOT Signature: _____ Date: _____

*Agent mean: Applicant contractor's or a person or business authorized to act on another's behalf.