

# Utility Provider Registration Form

All entities seeking to utilize City Right of Way (ROW) for provision or operation of a utility service must register prior to applying for a permit to conduct work within the ROW. Providing these credentials in advance streamlines the subsequent permit application and review process and ensures more effective communications regarding construction activities. We appreciate your cooperation and interest in partnering with the City of Denton!

**Utility providers must complete and submit this *Utility Provider Registration Form* along with the indicated documents and information to the Public Works Inspection Division to request registration.** Omissions or inaccuracies on the form may result in processing delay or denial of the request.

REGISTRATION NUMBER: _____
VALID DATE RANGE: ___/___/___ - ___/___/___
APPLICABLE FEES: _____
*** THIS BOX TO BE COMPLETED BY CITY OF DENTON ***

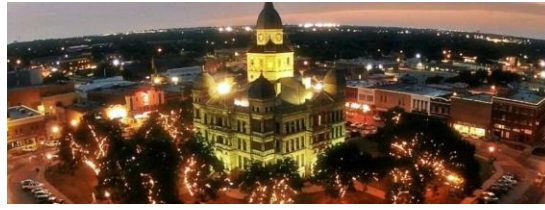
## UTILITY PROVIDER INFORMATION

COMPANY NAME: \_\_\_\_\_  
Enter the name of the company whom will own and operate the utility system in the ROW in the space above. Also, list below any additional business names, assumed name, or trade name by which the same company operates under:

ADDITIONAL COMPANY NAMES:  
\_\_\_\_\_  
\_\_\_\_\_

## UTILITY SYSTEM

Attach a company letter with a brief description of ROW construction activity anticipated to occur during the following year, including the type of utility service(s) to be provided, and a list and/or location maps of any known major upgrade, replacement, or extension of the utilities existing service area.



**ACCREDITATION**

Utilities must disclose and provide documentation evidencing their company’s training, authority, or certification to operate a utility system. Pertinent documentation may include but is not limited to:

- Municipal Franchise Agreement
- Texas Public Utilities Commission Certification
- Federal Communications Commission License
- Right of Way Use Agreement
- Interlocal Agreement

**CERTIFICATE OF INSURANCE**

Utility to provide certificate(s) of insurance demonstrating current automobile liability coverage, pollution liability insurance, workers compensation and employer’s liability coverage within the limits established by the City of Denton ROW Construction Management Ordinance, Chapter 25, Article II, Division 3, section 83.

**SURETY BOND**

Performance, Payment, and Maintenance bond, on the form provided by the City of Denton, covering the average cost per day to restore City infrastructure associated with the utility provider’s projected construction be performed in the ROW for the following year, and within the limits established by the City of Denton ROW Construction Management Ordinance, Chapter 25, Article II, Division 3, section 86. An itemized exhibit must be included showing how the average daily restoration cost was calculated.

**FEES**

Registration fees may apply, as posted on Development Services fee schedule.

**CONTACTS**

Utility providers shall submit the following contact information, at minimum, and are responsible for accurately maintaining or periodically updating contact information with their registration within 30 days of any change, and before applying for a permit.

**UTILITY REGISTRATION CONTACT**

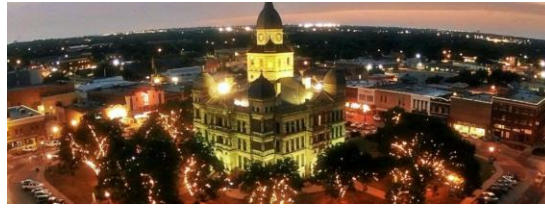
Primary contact with the utility company responsible for the submission and accuracy of the registration.

Company: \_\_\_\_\_ Contact Name: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Office Phone: ( \_\_\_\_\_ ) \_\_\_\_\_ - \_\_\_\_\_ Cell Number: ( \_\_\_\_\_ ) \_\_\_\_\_ - \_\_\_\_\_

Email Address: \_\_\_\_\_



**CONTACTS**

**24-HOUR EMERGENCY CONTACT**

Primary contact with the utility company regarding emergency repairs of their utility system.

Company: \_\_\_\_\_ Contact Name: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_ Zip: \_\_\_\_\_

Office Phone: ( \_\_\_\_ ) \_\_\_\_ - \_\_\_\_ Cell Number: ( \_\_\_\_ ) \_\_\_\_ - \_\_\_\_

Email Address: \_\_\_\_\_

**24-HOUR EMERGENCY CONTACT**

Provide a back-up contact with the utility company regarding emergency repairs of their utility system.

Company: \_\_\_\_\_ Contact Name: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_ Zip: \_\_\_\_\_

Office Phone: ( \_\_\_\_ ) \_\_\_\_ - \_\_\_\_ Cell Number: ( \_\_\_\_ ) \_\_\_\_ - \_\_\_\_

Email Address: \_\_\_\_\_

**UTILITY COORDINATION CONTACT**

Primary contact with the utility company for transmittal of design inquiries or forced relocation notices.

Company: \_\_\_\_\_ Contact Name: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_ Zip: \_\_\_\_\_

Office Phone: ( \_\_\_\_ ) \_\_\_\_ - \_\_\_\_ Cell Number: ( \_\_\_\_ ) \_\_\_\_ - \_\_\_\_

Email Address: \_\_\_\_\_

**CONSTRUCTION CONTACT**

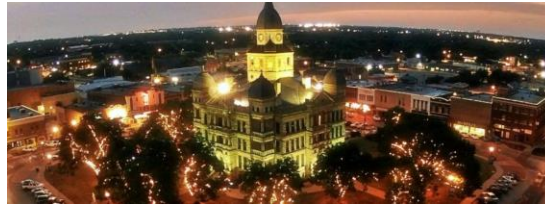
Primary contact with the utility company regarding concerns during construction of issued permits.

Company: \_\_\_\_\_ Contact Name: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_ Zip: \_\_\_\_\_

Office Phone: ( \_\_\_\_ ) \_\_\_\_ - \_\_\_\_ Cell Number: ( \_\_\_\_ ) \_\_\_\_ - \_\_\_\_

Email Address: \_\_\_\_\_



**CONTACTS**

In the space below, list all third-party companies that will be commissioned by the utility provider to conduct work within the ROW, including restoring excavations.

**SUB-CONTRACTOR**

Company: \_\_\_\_\_ Contact Name: \_\_\_\_\_  
Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_ Zip: \_\_\_\_\_  
Office Phone: ( \_\_\_\_ ) \_\_\_\_ - \_\_\_\_\_ Cell Number: ( \_\_\_\_ ) \_\_\_\_ - \_\_\_\_\_  
Email Address: \_\_\_\_\_

**SUB-CONTRACTOR**

Company: \_\_\_\_\_ Contact Name: \_\_\_\_\_  
Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_ Zip: \_\_\_\_\_  
Office Phone: ( \_\_\_\_ ) \_\_\_\_ - \_\_\_\_\_ Cell Number: ( \_\_\_\_ ) \_\_\_\_ - \_\_\_\_\_  
Email Address: \_\_\_\_\_

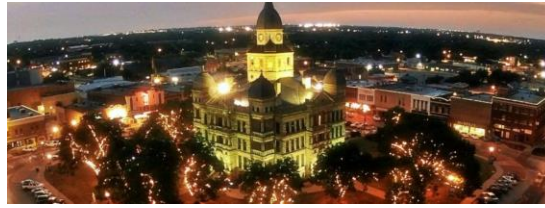
**SUB-CONTRACTOR**

Company: \_\_\_\_\_ Contact Name: \_\_\_\_\_  
Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_ Zip: \_\_\_\_\_  
Office Phone: ( \_\_\_\_ ) \_\_\_\_ - \_\_\_\_\_ Cell Number: ( \_\_\_\_ ) \_\_\_\_ - \_\_\_\_\_  
Email Address: \_\_\_\_\_

**SUB-CONTRACTOR**

Company: \_\_\_\_\_ Contact Name: \_\_\_\_\_  
Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_ Zip: \_\_\_\_\_  
Office Phone: ( \_\_\_\_ ) \_\_\_\_ - \_\_\_\_\_ Cell Number: ( \_\_\_\_ ) \_\_\_\_ - \_\_\_\_\_  
Email Address: \_\_\_\_\_

Include additional copies of this page if more space is required.



## SUBMISSION & REVIEW

Complete registration requests may be submitted online in Central Square or delivered to:

City of Denton  
Public Works Inspection Division  
Development Services Center  
401 North Elm Street  
Denton, Texas 76201  
(940)349-8360

Registration requests will be reviewed within 30 business days of submittal of all required documentation, information, and fees.

Utility providers will be supplied with a registration number by the City of Denton Public Works Inspection Division upon approval, which will be required to proceed with applying for ROW permits in Central Square.

## MAINTAINING REGISTRATION

Registration must be renewed annually, prior to January 1.

Any change to an approved registration request, such as utility contacts, contractors, insurance coverage, or transfer of ownership, must be reported in writing to the City by the utility provider within 30 days, and prior to application for any permit.

Good standing with the registration requirements and city code is necessary to continue to apply for permits and work within City Rights-of-Way.

## APPLICABILITY

Utility Registration does NOT apply to:

- Applicants who are not affiliated with a utility provider, and whom will not be installing permanent infrastructure in the public Right-of-Way. Contractor Registration with Development Services may apply.
- Municipally owned utilities such as Water Distribution, Wastewater Collections, or Denton Municipal Electric.