



**CITY OF BEACH  
PO BOX 278  
BEACH, ND 58621-0278  
cityofbeach@midstate.net**

**APPLICATION FOR CONSTRUCTION AND/OR  
REPAIR IN A PUBLIC AREA**

**Please complete the following information and submit fee of \$10.00  
payable to the City of Beach.**

**Name:** \_\_\_\_\_

**Bond/Insurance on file with the City Auditor**  **Yes**  **No**

**Address:** \_\_\_\_\_

**Reason for excavation:** \_\_\_\_\_

**Proposed location of excavation:**  
\_\_\_\_\_

**Anticipated date of excavation:**  
\_\_\_\_\_

**Anticipated date of completion:**  
\_\_\_\_\_

**ND One Call Locate Number:** \_\_\_\_\_

**Signature of Contractor** \_\_\_\_\_

**Date** \_\_\_\_\_