

APPLICATION RIGHT OF WAY LICENSE AGREEMENT

DEVELOPMENT SERVICES

11555 West Civic Center Drive / Marana AZ 85653 (520) 382-2600

INSTRUCTIONS

Review instructions before completing the **Right of Way License Agreement**. Separate applications are required for each license agreement. The instructions guide you through the process for your application **type**.

LICENSE AGREEMENT

COURTESY NOTICE REGARDING PRIVATE IMPROVEMENTS WITHIN THE PUBLIC RIGHT OF WAY The Town of Marana Subdivision Street Standards Manual revised May 2013 states in Section 6.10 Landscaping in the Public Right-of-Way Item 1 (c) "The installation and maintenance of landscaping in the public right(s)-of-way shall be accomplished by the developer, owner or private association, as agreed to in the approved, recorded covenants, conditions and restrictions. Assurances shall be required, and insurance policies, in a form acceptable to the Town, shall be required for all landscaping constructed in the public right-of-way"; and Item 1 (d) "A perpetual License Agreement for new landscaping, irrigation, raised planters, fencing, walls, signs, art, and monuments within the public right(s)-of-way shall be required."

Ordinance 91.21 states "Public Improvements shall not be constructed in any street, alley, drainage way, public easement, any other right-of-way dedicated to the Town of Marana or to the public, nor on Town of Marana property without an appropriate permit having been issued by the Town. Public improvements for the purpose of this code shall include, but are not necessarily limited to, grading, paving, curbs, gutters, drainage facilities, sidewalks, paths, trails, landscaping, irrigation, walls, and berms." A Right-of-Way Use Permit issuance for installation of private improvements within the public rights-of-way is required by Ordinance 91.21. Applicants may be subject to penalties for installations without applicable permits.

INSTRUCTIONS

Review the instructions before completing the **GIS Addressing Application**, **Right-of-Way Use Permit Application** and **Right of Way License Agreement Application**. The instructions guide you through the process for your application type. A separate application is needed for each new or amended license agreement. License transfers are no longer permitted. If you are part of a Master HOA, a legally authorized representative of the Master HOA must be present at the presubmittal meeting in order to apply for or amend a License Agreement.

- 1. Contact GIS Addressing at least two weeks prior to completing your RW Use Permit Application for assignment of an administrative or miscellaneous address for your right-of-way improvements. Provide this GIS administrative or miscellaneous address for the Right of Way Use Permit application and the Right of Way License Applications.
- 2. Contact Engineering-Right of Way to apply for a RW Use Permit at least two weeks prior to scheduling a license application presubmittal meeting. Right of way license agreement applications are not accepted without an administrative or miscellaneous address, an assigned RW use permit number and verification of payment for Permit Fees.

PRESUBMITTAL MEETING REQUIREMENTS

Applications are accepted at scheduled pre-submittal meetings at the Marana Municipal Complex. If the applicant does not have a completed right of way license agreement application and an assigned Right-of-Way Use Permit number, all supporting documentation and fees at that time, we cannot accept the application. On the completed Application, please have both the legally vested owner and designated representative sign.

Please bring the following documents to the presubmittal meeting:

- Application Fees \$1000 per license agreement or amendment.
 a. If applying for an agricultural or special license agreement, an additional council action fee of \$250 is required.
- 2. Copy of assigned RW Use Permit No. _____
- 3. Scaled location map of RW improvements.
- 4. Copies of 11 x 17 plan sets that apply: final plat, development plan, improvement plan, landscape/irrigation plan, and other.
- 5. Copy of a notarized, executed signature block of the legally vested owner or authorized corporate officer (required) signing the agreement.
- 6. If required, corporate resolution or other document authorizing a corporate officer to sign the license agreement.
- 7. For non-Arizona corporate or holding company entities, a copy of recent annual report filing and certificate of good standing.
- 8. As required, certificate of insurance and copy of additional insured endorsement from the owner meeting Town of Marana minimum insurance standards:
 - \$1 mil/occurrence, \$2 mil/occurrence general aggregate, covering project or location.
 - Town of Marana named as "additional insured" on all general, umbrella and excess coverage, evidenced by disclosure of endorsement or form number in the Description section.

 - Signed and dated insurance certificate and endorsement for 1 yr coverage, renewed annually.

(NOTE: The "Town of Marana" is the sole certificate holder. To facilitate USPS delivery, all certificates must be routed to the attention of requesting Department and Building.)

NOTE: Prior to execution of documents, the Town of Marana reserves the right to request written verification of the signer executing a contract or other conveyance document or request additional supporting documentation for any legal entity. Staff verifies corporate status of all Arizona-based legal entities and we are bound by Arizona Corporation Commission and Secretary of State records.

All documents must be submitted, fully executed for recordation and all fees paid prior to issuance of any permits or commencement of any work in the public right-of-way.



APPLICATION FOR RIGHT-OF-WAY LICENSE AGREEMENT

DEVELOPMENT SERVICES / 11555 West Civic Center Drive Marana AZ 85653 / (520) 382-2600

SUBMIT ALL THREE PAGES OF THE COMPLETED, OFFICIAL APPLICATION.

NO IMPROVEMENTS MAY BE INSTALLED IN THE PUBLIC RIGHT-OF-WAY UNTIL THE LICENSE AGREEMENT IS APPROVED, FULLY EXECUTED FOR RECORDATION AND ALL FEES ARE PAID.

OWNER/APPLICANT	
NAME	
GIS ADMINISTRATIVE ADDRESS	
NAME OF THE BENEFITED PROPERTY'S O'	WNER, IF DIFFERENT FROM THE REPRESENTATIVE
DEVELOPMENT OR RELATED SUBDIVISION	NAME
TOWN-ASSIGNED PROJECT NUMBER & L	ICENSE AGREEMENT NUMBER
APPLICANT IS SUBMITTING THIS APPLICA	TION FOR
A license to encroach upon Marana public right-of-way	Is this application intended Yes Is signage or monumentation Yes for agricultural or extraordinary use?
THE APPLICANT'S PROPOSED USE OF THI [Identify specific improvement types]	E MARANA PUBLIC RIGHT-OF-WAY SOUGHT TO BE LICENSED IS DESCRIBED AS FOLLOWS
DOCUMENT SUBMITTAL CHECKLIST	
Fees Due	Location Map(s)
Right-of-way use permit(s) number	(s) assigned
Certificate of Insurance and copy	Additional Insured Endorsement
Final plat	Development plan Landscape & irrigation plan
Improvement plan	Engineering plan Other
*Vested Owner- Signed & Notarize	d Signature Block(s)
Non-Arizona Entities only: Annual F	Report and Certificate of Good Standing



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* THE TOWN OF MARANA RESERVES THE RIGHT TO REQUEST VERIFICATION OF THE AUTHORIZED SIGNER FOR ANY PROPERTY RIGHT PROCESSED THROUGH THE TOWN. IF ALL FEES, SUPPORTING DOCUMENTATION AND A COMPLETE APPLICATION ARE NOT PROVIDED, THE APPLICATION WILL NOT BE PROCESSED BY STAFF.

All applications are made subject to the following terms and procedures:

- All applicable processing fees, made payable to the Town of Marana, listed in Town of Marana adopted Fee Schedule, as amended from time to time, must be received prior to processing by the Town as part of the pre-submittal process.
- The Town circulates this request to internal staff, public utility companies and other applicable external parties or agencies for review and comments.
- Comments received from applicable stakeholders may become conditions and/or requirements for approval of this application. Any stakeholder concern and/or requirements shall be addressed by the Applicant.
- Applications are not assumable, assignable or transferable.
- The Applicant is subject to minimum insurance standards set by the Town of Marana and Arizona Insurance Regulations, which may be amended from time to time.
- The undersigned has received, read and understands the timelines, potential costs and conditions and/or requirements associated with a request of this nature.

Initial	Initial						
DESIGNATED REPRESENTATIVE							
Name							
Mailing Address		City	State	Zip Code			
Phone Fax		E-mail Address					
Signature of Designated Represent	ative	Date					
PROPERTY OWNER OR AUTHORIZED	CORPORATE OFFICER						
Property Owner or Authorized Corp	oorate Officer						
Legal Owner or Authorized Agent N	Name						
Mailing Address		City	State	Zip Code			
Phone	Fax	E-mail Address					
Signature of Legal Owner or Autho	rized Agent	Date					



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CERTIFICATE OF INSURANCE MINIMUM REQUIREMENTS

It is the applicant's responsibility to provide these requirements to their insurance broker to prepare the proper certificate and required endorsements. Substandard certificates and endorsements will not be accepted.

Commercial General Liability (with bodily injury, property damage): \$1,000,000 per occurrence covering the **Project** or **Location** with minimum \$2,000,000 per occurrence for general aggregate

NOTE: Coverage limits may be satisfied with excess or umbrella coverage, only as long as those policies remain in force and the Town of Marana is named as "additional insured," evidenced by endorsement number and endorsement*

*A copy of the "additional insured" endorsement or form must be provided

Workers compensation and employers' liability as required by Arizona Law

Business automobile liability Insurance - \$2,000,000 per occurrence

Additional Insured: **"Town of Marana"** must be named as "additional insured" evidenced by endorsement number **and** a copy of the endorsement on all general liability, excess or umbrella coverage; the Town cannot solely be the certificate holder without being "additional insured"

Description: Should note the License Agreement Reference Number (LCA0000-000), physical location, administrative address, a general description of Right-of-Way encroachment areas and specific types of improvements covered under the license agreement

Signatures: Certificates and endorsements must be signed on their face

Renewal: Licensee shall provide an annual renewal certificate of insurance, a copy of the additional insured endorsement and any other supporting endorsements

Notice: Insured shall provide 48 hours. Written notice for termination or any changes in policy coverage, unless the insurer provides a cancellation notice recipient endorsement

| Initial | Initial | Initial | Initial |

WHAT TO LOOK FOR IN A CERTIFICATE OF INSURANCE

TI C	HIS CERTIFICATE IS ISSUED AS A ERTIFICATE DOES NOT AFFIRMAT ELOW. THIS CERTIFICATE OF INS	MAT	TER Y OI	R NEGATIVELY AMEND	Y AND	CONFERS ND OR AL	NO RIGHTS	UPON THE CERTIFICA	BY THE POLICIES	
IN to	EPRESENTATIVE OR PRODUCER, AI MPORTANT: If the certificate holder is times and conditions of the policy, contributed holder in lieu of such endors	s an	ADD pol	ITIONAL INSURED, the plicies may require an end						
_	DUCER	201111	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	,	CONTAC NAME:	Name of t	the Producer			
The Vendors Agent					PHONE FAX (A/C, No, Ext): (A/C, No): (A/C, No):					
123 Any Street Any City, Any State					ADDRES	NAIG #				
					INSURER(S) AFFORDING COVERAGE INSURER A : GL Carrier					
Your Vendor 123 Any State					INSURE					
					INSURER					
	Any City, Any State				INSURER D ;					
					INSURE					
co	VERAGES CER	TIFI	CATE	E NUMBER:	INGONE			REVISION NUMBER:		
IN	HIS IS TO CERTIFY THAT THE POLICIES DICATED. NOTWITHSTANDING ANY RE ERTIFICATE MAY BE ISSUED OR MAY KCLUSIONS AND CONDITIONS OF SUCH	PER	REME TAIN,	NT, TERM OR CONDITION THE INSURANCE AFFORD	OF ANY	THE POLICIE	OR OTHER	DOCUMENT WITH RESPONDED HEREIN IS SUBJECT	ECT TO WHICH THIS	
ISR TR	TYPE OF INSURANCE	ADOL INSR	SUBR	POLICY NUMBER		POLICY EFF (MM/DO/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMIT	rs	
	GENERAL LIABILITY							EACH OCCURRENCE DAMAGE TO RENTED	\$ 1,000,000	
	CLAIMS-MADE X OCCUR	Y	T					PREMISES (Ea occurrence)	\$ 300,000	
A.	CLAIMS-MADE X OCCUR			AM123456		01/01/2011	01/01/2012	MED EXP (Any one person) PERSONAL & ADV INJURY	\$ 5,000 \$ 1,000,000	
			ĺ					GENERAL AGGREGATE	\$ 2,000,000	
	GENT AGGREGATE LIMIT APPLIES PER:	_[ne	Box must be ched	cked			PRODUCTS - COMP/OP AGG	\$ 1,000,000	
_	AUTOMOBILE LIABILITY					Τ		COMBINED SINGLE LIMIT	\$	
В	X ANY AUTO							(Ea accident) BODILY INJURY (Per person)	s 1,000,000	
	ALL OWNED SCHEDULED AUTOS AUTOS DD7904044			PP7891011		01/01/2011	01/01/2012	BODILY INJURY (Per accident)	5	
	HIRED AUTOS NON-OWNED AUTOS			147001011		01/01/2011	01/01/2012	PROPERTY DAMAGE (Per accident)	\$	
	X UMBRELLA LIAB X OCCUR								5	
A	EXCESS LIAB X OCCUR CLAIMS-MADE	ABCD1234			0.	01/01/2011	01/01/2012	EACH OCCURRENCE AGGREGATE	\$ 5,000,000 \$ 5,000,000	
	DED RETENTION \$								5	
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY Y/N		_					X WC STATU- TORY LIMITS OTH- ER		
۱ ۵	OFFICEMEMBER EXCLUDED? N/A			WC1336565	- 1	01/01/2011	01/01/2012	E.L. EACH ACCIDENT	\$ 500,000	
	(Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below							E.L. DISEASE - EA EMPLOYEE E.L. DISEASE - POLICY LIMIT	s 500,000 s 500.000	
A	Liquor Liability	ΓŸ	Y	LL321654		01/01/2011	01/01/2012	\$1,000,000		
`		١'	١.	LL321004		01/01/2011	01/01/2012			
ESC	RIPTION OF OPERATIONS / LOCATIONS / VEHICL	ES (A	ttach.	ACORD 101, Additional Remarks 5	Schedule,	if more space is	required)			
na	should describe what the vendor is doin me the Town as an Additional Insured a ear. Remember (Who, What, When, Wh	nd to	refe	rence and identify any End	torseme	nt you need	by Endorsem	ent or Form Number. The		
ОТ	E: All Endorsements that apply must be	atte	ched				t numbe			
- 1				an			ing num	ber –		
FF	RTIFICATE HOLDER			mı		Provide ELLATION	ea			
					THE	EXPIRATION	DATE THE	ESCRIBED POLICIES BE OF	BE DELIVERED IN	
	The City/Town Should be Nar				ACCC	ORDANCE WI	TH THE POLIC	Y PROVISIONS.		
	A Department should not be r		d exc	cept for Routing Purposes	AUTHOR	IZED REPRESE	NTATIVE			
	without the City/Town also na	med			Make si	ure there is a	signature he	re.		
cc	DRD 25 (2010/05)	TI	ne A0	CORD name and logo ar	re regist			ORD CORPORATION.	All rights reserved.	

2

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