



**UTILITY REGISTRATION FORM  
FOR UTILITY PLACEMENT  
ON COUNTY HIGHWAY RIGHT-OF-WAY  
CHISAGO COUNTY PUBLIC WORKS DEPARTMENT**

Mailing Address: 313 North Main Street, Room 400  
Center City, MN 55012  
Office Address: 31325 Oasis Road  
Center City, MN 55012  
Main: (651) 213-8700 Fax: (651) 213-8772  
Email: [Scott.Johnson@chisagocounty.us](mailto:Scott.Johnson@chisagocounty.us) Phone: (651) 213-8705

Joe Triplett, P.E.  
Director | County Engineer

Ben Hobert, P.E.  
Assistant County Engineer

Paul Gibson, L.S.  
County Surveyor

Bruce Lind  
Maintenance Superintendent

Ben Utech  
Traffic Operations Manager

Barbara Shimmon  
Finance | Office Manager

**ALL REGISTRATION REQUESTS MUST INCLUDE COPIES OF REQUIRED CERTIFICATES AND LICENSES. CERTIFICATE OF INSURANCE LISTING CHISAGO COUNTY AS ADDITIONAL INSURED MUST BE SUBMITTED WITH REGISTRATION.**

**REGISTRATION TYPE (CHECK ONE BOX BELOW)**

<input type="checkbox"/> New Utility Registration	<input type="checkbox"/> Update Existing Utility Registration
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**REGISTRATION INFORMATION (CHECK ONE BOX BELOW)**

Registration is for:	
<input type="checkbox"/> Utility Owner Requesting to Place a Utility in ROW	<input type="checkbox"/> Other, Explain: _____
<input type="checkbox"/> Contractor Requesting to Work in ROW	_____

**COMPANY INFORMATION**

Applicant Name:	Telephone:
Address:	
Email Address:	

**GOPHER STATE ONE CALL INFORMATION (IF APPLICABLE)**

Registration Number:	ID Number:
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**LOCAL REPRESENTATIVE**

Local Contact Person that can speak for Utility Company and is authorized to accept official notices from the County and act as an agent for the Registrant.	
Name:	Telephone:
Address:	
Email Address:	

**24-HOUR EMERGENCY CONTACT INFORMATION**

Name:	Telephone:
Name:	Telephone:
Name:	Telephone:

**FOR OFFICE USE ONLY**

Date Received:	Registration Number Assigned:
Date Approved:	Registered by Whom:
Official County Contact Name:	Emergency County Contact:
Telephone:	Telephone: