



**City of Cleveland**  
**Public Service Department**  
**Division of Engineering & Construction**

**Right-of-Way Service Provider Registration**

<b>ROW PROVIDER #</b>

*Registration number will be assigned by the City of Cleveland and will always remain the same*

Certain words have their meanings defined in City Ordinance §510.01 (b)

Check one:     Initial Registration                       Annual Renewal

**Section A**

SERVICE PROVIDER NAME			
STREET ADDRESS	CITY	STATE	ZIP CODE
<p><b>NOTE:</b> Under Cleveland Codified Ordinance Section §510.02 (c) (2) A., Service Providers must provide the above information for any affiliate of the Service Provider that will use or occupy the public right-of-way or are in any way responsible for facilities in the public right-of-way. Please provide this information on a separate sheet attached to this registration form.</p>			

**Section B:** The following information must be provided for the local officer, agent or employee of the Service Provider responsible for the accuracy of the information provided in this registration. Under CCO§510.02(c)(2)B., this person must be available at all reasonable times to be notified in case of emergency

NAME	PHONE NUMBER	EMAIL ADDRESS	
STREET ADDRESS	CITY	STATE	ZIP CODE

**Section C:** General description of services provided or to be provided by Service Provider over its system or facilities in the Public right-of-way:

**Section D:** Provide a description of the type of transmission medium used (or to be used) by the Service Provider to operate a system in the public right-of-way.

**Section E:** Attach a description of Service Provider’s existing facilities in the public right-of-way that generally identifies the location and route of the facilities to the extent it is available and in detail acceptable to the Director of Public Service or Director’s designee after consultation with the Service Provider.

**Section F:** Attach a preliminary construction schedule and proposed completion date for all capital improvements planned, as of the date of this registration, for the twelve-month period following the date of registration.

**Section G:** If the Service Provider does not operate under a tariff from the PUCO or is not owned by a political subdivision of the State, attach a description of the Service Provider’s access and line extension policies.

**Section H:** Attach evidence that the Service Provider has complied, or will comply, with the insurance requirement contained in CCO§510.02(2)(e).

**Section I:** Attach evidence that the Service Provider has received authorization from the State, as required by law, to operate a system and provide services in the City of Cleveland.

**INDEMNIFICATION:** To the extent permitted by law, the undersigned on behalf of the Service Provider and as the Service Provider's authorized representative agrees to undertake to defend, indemnify and hold the City and its elected and appointed officers, officials, employees, agents, representatives and subcontractors harmless from and against any and all damages. Losses and expenses, including reasonable attorney's fees and costs of suit or defense, arising out of, resulting from or alleged to arise out of or result from the negligent, careless or wrongful acts, omissions, failures to act or misconduct of the Service Provider or its affiliates, officers, employees, agents, contractors or subcontractors in the construction, reconstruction, installation, operation, maintenance, repair or removal of its system or facilities, and in providing or offering services over the facilities or system, whether the acts or omissions are authorized, allowed or prohibited by CCO Chapter 510.

This registration has been accurately prepared and submitted on behalf of the Service Provider by:

NAME	TITLE
SIGNATURE	DATE

**CITY USE ONLY**

Registration	
Date filed with City: _____	BY _____ (INITIALS)
Date Additional Information Requested (if incomplete): _____	BY _____ (INITIALS)
Date Registration Complete: _____	BY _____ (INITIALS)