



TOWN OF SHELBY

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Excavation or Obstruction of Right-of-Way Application

Owner Name: _____ Phone Number: _____

Address of Work: _____

Area and Size to be Excavated or Obstructed: _____

Purpose of request: _____

____ Drawing/Map of the area must be submitted with the application.

____ Deposit to be submitted with the application (if required)

** Applicant is Responsible for contacting Diggers Hotline, obtaining Waivers from Utility Companies, obtaining permits from Erosion Control and necessary safety precautions including safety cones.

** No Blocking Driveways

Start Date: _____ End Date: _____ *2 Week Limit

Company Name: _____ Phone Number: _____

Email: _____

Signed: _____ Date: _____

OFFICE USE ONLY

Application Received By: _____ Date: _____

Deposit Required? Yes/No | \$ _____ Deposit Amount Required

Deposit Received By: _____ Date: _____

APPROVED/DENIED By: _____ Date: _____

NOTES: Excavation=\$50.00 fee (plus deposit) | Obstruction=\$25.00 fee