**Town of SHELBY, LA CROSSE County**

**APPLICATION/PERMIT to CONSTRUCT, OPERATE,
and MAINTAIN UTILITIES WITHIN HIGHWAY
RIGHT-OF-WAY**



|  |  |
| --- | --- |
| Applicant/Company: |       |
| Address: |       |
|  |       |
| Office Phone: |       |
| Cell Phone: |       |
| Plans Prepared By: |       |
| Company: |       |
| Phone: |       |
| Email:  |       |
|  |  |

|  |
| --- |
| **LOCATION INFORMATION** |
| Highway(s): |       |
|  |       |
|  |
|    |  of the |    |  Sec |    | T    N | R   E |
|  |
| **ADDITIONAL INFORMATION** |
| Annual Service Connection Permit? [ ] Yes [ ] No |
| Utility Work Order # |       |
| Fee Required? | [ ] Yes [ ] No | Amount | $       |

**DESCRIPTION OF PROPOSED WORK (Check and fill out all that apply)**

UTILITY TYPE: [ ]  Electric [ ]  Gas/petroleum [ ]  Communications [ ]  Water [ ]  Sanitary sewer [ ]  Private line

 [ ]  Transmission [ ]  Distribution [ ]  Service *Facility Size/Capacity:*

 (diameter, # fibers, psi, Kv, etc.)

ORIENTATION: [ ]  Overhead [ ]  Underground [ ]  Parallel to hwy centerline [ ]  Hwy crossing [ ]  Bridge attachment [ ]  Tunnel

WORK TYPE: [ ]  New construction [ ]  Improve/repair existing [ ]  Maintenance [ ]  Removal [ ]  Abandon in place

CONSTRUCTION METHOD(S): [ ]  Plow [ ]  Trench [ ]  Bore [ ]  Suspend on poles/towers [ ]  Open cut hwy [ ]  Cased

[ ]  Tree cutting/removal [ ]  Chemical treatment of trees/brush *Erosion Control Designation*: [ ]  Major [ ]  Minor

Provide additional narrative if needed:

NAME AND PHONE NUMBER OF UTILITY REPRESENTATIVE

RESPONSIBLE FOR CONSTRUCTION:

|  |  |  |  |
| --- | --- | --- | --- |
| Estimated Starting Date: |       | Estimated Completion/Restoration Date: |       |

The Applicant understands and agrees that the permitted work shall comply with all permit provisions and conditions of the Utility Accommodation Policy of the above-named Town in effect at the time of this application and with any special provisions listed below or attached hereto, and any and all plans, details, or notes attached hereto and made a part thereof.

**The Applicant acknowledges reciept of and agrees to the indemnification requirements enclosed with this permit form: \_\_\_\_\_\_(Initial)**

By:

 (Signature of Applicant/Company Authorized Representative) (Title) (Date)

(Typed/Printed Name of Person Signing Above or Electronic Signature Code) (Authorized Applicant/Company Representative Telephone Number)
 **OFFICE USE ONLY ON PAGE 2**

**PERMIT APPROVAL BY PERMITTING AUTHORITY**

The foregoing application is hereby approved, and permit issued by the Town subject to full compliance by the Applicant with all provisions and conditions stated in the Utility Accommodation Policy of the above-named Town including the Indemnification as included in Section 3 of the Utility Accommodation Policy in effect on the date of this application and as appended to this permit.

Supplemental Provisions Attached:       Yes       No

 **FEE RECEIVED: $**

By: **CHECK NUMBER:**

 (Authorized Representative for Town)

 **DATE ISSUED:**

 (Title) (Date)

 **HWY PROJECT #:**

Date Revised: \_\_\_/\_\_\_/20\_\_\_ **PERMIT NUMBER: \_\_\_\_\_\_\_\_\_\_\_\_\_\_**