

REVISED
ROADWAY EXCAVATIONS & PLACEMENT OF OBSTRUCTIONS
TOWN OF NEW GLARUS, GREEN COUNTY, WISCONSIN

REQUESTED BY: _____
(Name and Address)

*PRIVATE RIGHT OF WAY _____

PERMISSION IS HEREBY REQUESTED TO EXCAVATE IN: (Check One) ROAD _____ PUBLIC RIGHT OF WAY _____
ADDRESS OF OPENING _____ PAVEMENT TYPE _____
EXCAVATION FOR THE PURPOSE OF _____
APPROX. OPENING SIZE _____ FT. X _____ FT. TOTAL SQUARE FEET: _____
SKETCH REQUIRED? _____ (If opening exceeds 20 sq. ft. or 30 ft. in length, sketch required (3 copies))
ACTUAL OPENING SIZE _____ FT. X _____ FT. TOTAL SQUARE FEET: _____
INSPECTION BY _____ DATE _____
NAME OF CONTRACTOR _____ PHONE _____
NAME OF PAVING CONTRACTOR _____ PHONE _____
NAME OF OWNER _____ PHONE _____
PERMIT (CASH BOND). See schedule below.
EROSION CONTROL PERMIT REQUIRED? _____ YES _____ NO

ALL RESTORATION WORK SHALL BE GUARANTEED FOR A PERIOD OF ONE YEAR AFTER COMPLETION AND OFFICIAL ACCEPTANCE IN WRITING OF SAME. IF THE REPAIR IS STILL IN COMPLIANCE AFTER THE ONE-YEAR GUARANTEE PERIOD, THE DEPOSIT MAY BE REFUNDED. * EXCAVATING PERMIT IN PRIVATE RIGHT OF WAY IS EXEMPTED FROM FEES.

DEPOSIT AND INSPECTION FEE SCHEDULE:

Permit Fee \$ 75.00 Non-Refundable Regardless of Project Size
Letter of Credit/Cash Deposit \$1,000.00 Minimum or a per square foot fee as per the Fee Schedule. (whichever is larger). **All invoices by the Town and/or Engineer that are billed to applicant must be paid in full before the Letter of Credit/Cash Deposit will be released.**
Charge per Utility Pole \$ 75.00 Non-Refundable Regardless of Project Size
Forfeiture for Damages per Sec. 4(b) & (c), Sec. (14) &(17)

For multiple excavations within the current calendar year, an applicant, may in lieu of the above, provide an annual deposit of \$10,000. Such deposit shall at all times be maintained at \$10,000.00.

=====

CHARGES:

CASH DEPOSIT/LTR OF CREDIT: _____ PERMIT FEE _____ TOTAL _____
DEPOSIT: _____ LESS CHARGES _____ REFUND OR AMOUNT DUE _____
ITEMIZATION OF CHARGES:

***EACH EXCAVATION WILL REQUIRE A SEPARATE APPLICATION

_____ CERTIFICATE OF INSURANCE PROVIDED TO TOWN (CHECK DATE PROVIDED). NO APPLICATION ISSUED WITHOUT SAID CERTIFICATE BEING ON FILE IN PROPER AMOUNT: Personal Injury: Property: One Person, One Accident (\$1,000,000), (\$1,000,000), (\$500,000). Town shall be notified at least 10 days prior to cancellation or expiration of insurance.

PRESENT THIS APPLICATION AT THE TOWN CLERK'S OFFICE AND PAY PROPER FEES. SEE EXCERPT FROM ORDINANCE 8.00 (12) FOR METHOD OF DOING WORK.

PERMIT GRANTED (DATE) _____

TOWN BOARD - AUTHORIZED PERSON

ADMINISTRATION - AUTHORIZED PERSON

THIS PERMIT VALID FOR 60 DAYS FROM DATE OF ISSUANCE UNLESS TIME EXTENSION IS GRANTED BY TOWN BOARD.

_____ EXTENSION GRANTED TO (DATE) _____ REASON: _____

SIGNED: _____

Nothing herein waives the Town's rights to require utilities to be relocated at the permittee's expense when public right-of-way are required to be relocated.