

SAWYER COUNTY HIGHWAY DEPARTMENT

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

Applicant/Company: _____

Address: _____

Office Phone: _____

Local Phone & Pager: _____

Plans Prepared By: _____

Preparer's Phone: _____

LOCATION INFORMATION

Highway(s) _____

Town/Village/City of: _____

____ 1/4 of the ____ 1/4 Sec ____ T ____ N R ____

ADDITIONAL INFORMATION

Annual Service Connection Permit Yes No

Utility Work Order # _____

Fee Required Permit 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, 0 fibers, psi, Kv, ect.)

ORIENTATION Overhead Underground Parallel to Hwy centerline Hwy Crossing Tunnel Bridge Attachment

WORK TYPE: New Construction Improve/repair existing Maintenance Removal Abandon in place

CONSTRUCTION METHOD(S): Plow Trench Bore Suspend on poles/tower 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:** _____

Estimate Starting Date: _____ Estimate Completion/Restoration Date: _____

The Applicant understands and agrees that the permitted work shall comply with all permit provisions and conditions of the Utility Accommodations Policy of the above-named county 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.

By: _____ Title _____ Date _____
(Signature of Applicant/Company Authorized Representative)

(Typed/Printed Name of Person Signing Above or Electronic Signature Code)

(Authorized Applicant/Company Representative Telephone Number)

DO NOT WRITE BELOW THIS LINE

PERMIT APPROVAL BY PERMITTING AUTHORITY

The foregoing application is hereby approved and permit issued by the Permitting Authority subject to full compliance by the Applicant with all provisions and conditions stated in the Utility Accommodation Policy of the above-named county including the Indemnification as included in 96.03 of the WCMA Utility Accommodation Policy in effect on the date of this application.

Supplemental Provisions Attached: Yes No

By: _____

(Authorized Representative for County)

Title

Date

Fee Received \$ _____

Check Number: _____

Date Issued: _____

Hwy Project #: _____

Permit Number: _____