



CONSTRUCTION IN THE RIGHT-OF-WAY PERMIT

Receipt # _____
 Date Issued: _____
 Fee: _____
 Permit Number: _____

Applicant Information * Contractor Utility Owner Other: _____

Name (print): _____ Company: _____
 Address: _____ Telephone: _____ Fax: _____
 _____ e-mail: _____

Applicant Signature: _____ **Date:** _____

Contractor Information * (If Different from Applicant) Contact Name: _____
 Contractor to Perform Work: _____ Cell Number: _____

Location of Work * Address: _____ Street Excavation Terrace Excavation

Street: _____ From: _____ To: _____

Description of Work * New Replacement Repair Abandonment / Removal

General Description: _____
 Estimated start date: _____ Estimated completion date : _____

Utility Construction (Type):	Utility Construction (Description):	Sidewalk / Driveways / Landscaping / Other
<input type="checkbox"/> Gas	<input type="checkbox"/> Main Line (Size: _____")	<input type="checkbox"/> Sidewalk - No. Panels Removed _____
<input type="checkbox"/> Electric	<input type="checkbox"/> Service/Lateral (Size: _____")	<input type="checkbox"/> Sidewalk (complete)
<input type="checkbox"/> Telephone / Fiber Optic	<input type="checkbox"/> Tap (Size: _____")	<input type="checkbox"/> Driveway Approach
<input type="checkbox"/> Cable TV	<input type="checkbox"/> Valve (Size: _____")	<input type="checkbox"/> Curb Cut
<input type="checkbox"/> Utility Pole/Street Light	<input type="checkbox"/> Hydrant	<input type="checkbox"/> Landscaping
<input type="checkbox"/> Sanitary Sewer	Installation Method	<input type="checkbox"/> Core Sample
<input type="checkbox"/> Storm Sewer	<input type="checkbox"/> Open Cut <input type="checkbox"/> Overhead	<input type="checkbox"/> Other: _____
<input type="checkbox"/> Water	<input type="checkbox"/> Auger/Bore/Trenchless	

Additional Comments: _____

(*) ALL FIELDS WITH AN ASTERISK ARE TO BE COMPLETED BY THE CONTRACTOR

Requirements

Construction Plan/Sketch Traffic Control Plan, Questions Contact FDL County Sheriff Dpt.
 Erosion Control Plan Contact Town Hwy Dpt. (920-921-5224)

Surface Restoration Requirements

Required under this permit: Temporary Permanent None

Material(s): _____ " Asphalt _____ " Concrete Grass / Other:

- Permit approval is subject to the following conditions:**
1. The Applicant is responsible to obtain any further permits that may be required for this project.
 2. The Applicant shall install the proposed facilities as shown on the plan(s) that were submitted to the Town of Taycheedah.
 3. The field representative shall have a copy of the approved permit on-site at all times.
 4. Any facilities installed as part of this permit shall be installed in compliance with the permit and State Statutes.
 5. This permit is subject to IMMEDIATE REVOCATION the conditions of this permit are not followed or if unfavorable traffic conditions develop.
 6. Upon completion of work contact the Town Roads Dpt. for any necessary inspection.

The applicant, in exchange for receiving this permit, warrants that all street excavations shall be performed in conformity to Town ordinance, standards and specifications, be properly barricaded and lighted. In the event that the Town Ordinances, State Codes and Statutes and/or permit conditions are not followed, the applicant agrees to assume liability for any costs incurred by the Town for corrective work required to bring the subject area into compliance with said Specifications. By applying for and accepting this permit, permit holder agrees to assume liability for any and all damages resulting from his occupancy, use or excavation of the roads or premises. No work shall commence prior to approval of this permit by the representative of the Town of Taycheedah.

The applicant shall make all permanent or temporary repairs to any/all excavations caused by the work done herein as directed by the Town. All repairs shall be done in accordance with standards and specifications in place at the time this permit is issued.

My signature, as the applicant/permittee, acknowledges that I have read the above, understand the same and agree to be bound by the terms herein.

Additional Comments _____

APPROVED BY: _____ **DATE:** _____