



# MARQUETTE COUNTY

Marquette County Highway Department

PO Box 398

Montello, WI 53949

Phone: 608-297-3071 Fax: 608-297-2250



## Application/Permit to Construct, Operate and Maintain Utilities within Highway Right-of-Way

Applicant/Company: \_\_\_\_\_  
Address: \_\_\_\_\_  
Phone Number: \_\_\_\_\_  
Plans Prepared: \_\_\_\_\_  
Preparer's Phone: \_\_\_\_\_

<b>LOCATION INFORMATION</b>
Highway(s): _____
Town/Village/City of: _____
_____ ¼ of the _____ ¼ Sec _____ T _____ N R _____ E
<b>ADDITIONAL INFORMATION</b>
Annual Service Connection Permit _____ Yes _____ No
Utility Work Order # _____

### 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 METHODS:  Plow  Trench  Bore  Suspend on poles/towers  Open/cut hwy  Case

Tree cutting/removal  Chemical treatment 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 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: \_\_\_\_\_

(Signature of Applicant/Company Authorized Representative)

(Title)

(Date)

(Typed/Printed Name of Person Signing Above)

(Authorized Applicant/Company Representative Phone 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 WCHA Utility Accommodation Policy in effect on the date of this application.

Supplemental Provisions Attached: \_\_\_ Yes \_\_\_ No

By: \_\_\_\_\_

(Authorized Representative for County)

(Title)

(Date)

<b>Make Check Payable at time of application to: Marquette County Highway Department</b>
<b>Permit Application: \$50.00</b>
<b>Boring Under Roadway: \$50.00</b>
<b>Open-Cut Through Roadway: \$250.00</b>
<b>*Fee is non-refundable</b>