

**APPLICATION & PERMIT TO CONSTRUCT, MAINTAIN, AND OPERATE UTILITIES
WITHIN WASHINGTON COUNTY TRUNK HIGHWAY RIGHT-OF-WAY**

(Form CU-99-1 Revised 1/4/16)



Permit Fee - \$75 Open Cut Pavement - \$200 per pavement cut, plus permit fee

Payment submitted with this application: \$ _____ - OR - Annual Service Connection Permit: Yes No

APPLICANT INFORMATION

Name: _____
Address: _____
City: _____ State: _____ Zip: _____
Phone: () _____
Fax: () _____
Email: _____

*Select preferred method of contact upon approval or denial (check one)
 Mail Fax Email

THIS SECTION IS TO BE COMPLETED BY THE HIGHWAY DEPARTMENT

PERMIT NUMBER:

If ASCP - number ___ of 35 in calendar year: _____

PROJECT LOCATION

County Highway: _____

Municipality: Town Village City
of _____

PROJECT DETAILS

Describe Type of Utility Installation: _____

Utility Person Responsible for Construction — Name: _____ — Phone: () _____

Plans Prepared by — Name: _____ — Phone: () _____

Estimated Start Date: _____ Estimated Restoration Date: _____

(check all that apply)

- To cross roadway Overhead Underground Parallel to centerline of road
- Tunnel Trench Open cut Suspend on towers
- Jack and bore Cased Suspend on poles Tree cutting / removal
- Bridge attachment Water Sanitary sewer Telephone / communicator
- Gas / electric Chemical treatment Other(s) _____

All department, county, utility, and contractor personnel who are out of their vehicles and within the road rights-of-way must wear ANSI approved safety apparel meeting ANSI class 2 or 3 requirements.

The Applicant understands and agrees that the permitted work shall comply with all permit provisions and conditions of the Washington County Utility Policy (available on-line at: www.co.washington.wi.us/hwy) 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.

Signature of Applicant / Authorized Representative

Title

Date

THIS SECTION IS TO BE COMPLETED BY THE HIGHWAY DEPARTMENT

Permit Application Approved / Denied — Approved Denied If approved, expiration date of permit: _____

Special Provisions: _____

Signature of Authorized Representative

Title

Date