

UTILITY PERMIT APPLICATION

Construct / Operate / Maintain Utilities within Municipal Right-of-Way Per Municipal Code Chapter 310; Right-of-Way Management Office Use Only

Receipt	No.
neecipe	

Permit No.___

Date ____

APPLICANT / COMPANY INFORMATION							
Company Name:			Contact Name:	Contact Name:			
Address:							
City:		State:		Zip Cod	e:		
Phone:		E-Mail:					
		PROJECT II	NFORMATION				
Address/Location of Proposed Work:							
Estimated Start Date:			Number of DPF	Number of DPPA's:			
Estimated Working Days:			Estimated Com	pletion D	ate:		
Work Job #:			Depth of Bury:				
For Large Project	s, propose	d facility ma	ps are required (n	ot to exc	eed 1:100 scale)		
PLAN PREPA	RER INFO	RMATION	(🗆 CHECK IF SA	AME AS A	APPLICANT)		
Company Name:			Direct Phone:	Direct Phone:			
Contact Name:			E-Mail:				
	со	NTRACTO		I			
Contractor Name:			Contact Name:	Contact Name:			
Address:		City	:		State:	Zip Code:	
Phone: Emergency Phone (24/7):		FAX No.:					
E-Mail:							
	SUB-	CONTRACT	OR INFORMATIO	ON			
Company Name:			Direct Phone:				
Address:			E-Mail:				
Foreman/Project Manager Inform	ation		Secondary Contact				
Name:		Name:					
E-Mail:		E-Mail:					
Phone:		Phone:					
Emergency Phone (24/7):		Emergency Phone (24/7):					
Proposed Softscape Restoration Contractor		Proposed Hardscape Restoration Contractor					
Company Name:		Company Name:					
Contact Name:			Contact Name:				
E-Mail:			E-Mail:	E-Mail:			
Cell/Phone:		Cell/Phone					



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PROJECT LENGTH							
□ Small (101 LF – 250 LF)* □ Medium (251 LF – 1 Mile) □ Large (> 1 Mile)						rge (> 1 Mile)	
TYPE OF CONSTRUCTION – CHECK ALL THAT APPLY							
Potholing	🗌 Trench / Op	en Cut 🛛 Plow / Knife		w / Knife	🗌 Bore / Drill	Televising	
WORK TYPE							
□ New Construction	Improve / Existing	I I Maintenance		ntenance	Removal	□ Abandon	
□ Other:							
DESCRIPTION OF PROPOSED WORK – CHECK ALL THAT APPLY							
Utility Type:	🗌 Water Main	🗆 Sanitary	Main	Storm Main	□ Service	Conduit	
	Electric	□ Transmission		□ Distribution	Pedestals	Ict. Box / Vault	
	🗌 Fiber	□ Communication		Gas / Petroleur	n 🗌 Utility Pole	Anchor	
	□ Other:						
ORIENTATION – CHECK ALL THAT APPLY							
Village ROW		County ROW	,	🗌 State ROW	,	Utility Easement	
Underground		Overhead 🗌 Parallel to Ce		Centerline	Crossing Road		
POTENTIAL CONFLICTS WITH VILLAGE PROPERTY							
🗌 Village Water M	ain or Lateral	🗆 🗆 Villa	ge Sanitar	y Sewer or Lateral	□ Village Sto	orm Sewer or Lateral	
Village Owned Electrical Village Owned Fiber Optic Village Owned Fiber Optic				🗌 Village Ov	vned Street Trees		



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FEE	CALCULATION				
FEE ITEM	соѕт	# OF UNITS	TOTAL		
Sanitary sewer main, storm sewer main, water main	\$5/LF				
Sanitary sewer and storm sewer structures	\$500/Each				
Tunneled, plowed, or directional bored underground utilities in ROW	\$0.25/LF				
HDPE plastic conduit, PVE piping, ducts, steel pipe, other approved materials (each)	\$0.25/LF				
New or replacement overhead cabling/wires	\$0.10/LF				
New or replacement underground cabling/wires (no ground disturbance)	\$0.10/LF				
All large cabinets 36" X 60" X 59", large vaults 30" X 48" X 36", control & switching "huts" Transformers or VRAD cabinets	\$200/Each				
Smaller cabinets, vaults, pedestals	\$100/Each				
New or replacement utility manholes, hand holes, flower pots and monitoring or purging wells	\$50/Each				
Ground Rods	\$25/Each				
Trees (require Village approval to trim or remove a terrace tree)	\$300/Each plus cost of new tree TBD				
Marker post/post mounted signs	\$5/Each				
New poles (less than 60', including guy wires, small peds, and boxes)	\$25/Each				
New poles (60' or more, including guy wires, small peds, and boxes)	\$100/Each				
Open cutting/bore pits (hardscape areas)	\$1,000/Each				
Open cutting/bore pits (softscape areas)	\$500/Each				
Potholing (hardscape areas)	\$50/Each				
Potholing (softscape areas)	\$10/Each				
Nonemergency After-the-Fact Permit Fee	\$250 plus cost of original permit				
TOTAL PERMIT APPLICATION FEE:					



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SIGNATURES

The applicant has received and agrees that the permitted work shall comply with all permit provisions and conditions of the Utility Accommodation Policy in effect at the time of this application, and with any special provisions listed below or attached hereto, and plans, details, or notes attached hereto and made a part therefor. By signing, the applicant hereby accepts responsibility for the project.

Signature of O	wner/Authorized Representative	Dat	e				
	SUBN	IIT APPLICATION & CO	PY OF SKETCH TO:				
E-mail to:	streets@foxcrossingwi.gov						
Or FAX to:	920-720-7113						
Or Mail to:	Fox Crossing Street Departmer 2000 Municipal Drive Neenah, WI 54956	nt					
OFFICE USE ONLY: TOTAL FEES & PERMIT APPROVAL							
Permit Fee: \$_		Paid	□ Invoiced	Not Paid			
Inspection & C	Oversight Fee: \$	Paid	□ Invoiced	Not Paid			
Escrow: \$		Paid	□ Invoiced	Not Paid			
Permit Determ	nination:	□ Approved	Denied	Conditionally Approved			
Approved By			Dat	e			