# **TOWN OF COTTAGE GROVE**

## APPLICATION FOR PERMIT TO WORK IN TOWN ROAD RIGHT-OF-WAY

This permit is required and shall be issued in accordance with the provisions of Section 08.03 of the Town of Cottage Grove Code of Ordinances.

PPLICANT INFOR	RMATION – Certificate of	insurance showing th	e Town as an additio	nal insured is require	ed for applicant.
Company		Contact Name		E-Mail Address	
Address		City		State	Zip Code
Office Phone		Alternate Phone		Fax Number	
Permit Mailing Address (if different from above)		City		State	Zip Code
ONTRACTOR INFO	DRMATION - Certificate	of insurance showing	the Town as an addit	tional insured is requ	uired for contractor
Company Name		Contact Name		E-Mail Address	
Office Phone		After Hours Phone (Required)		Fax Number	
PROPOSED WORK	(				
Town Road where right-of-way is located		Plans Prepared by		Copy Enclosed	
	tion (gas, fiber, etc	;.):			
Facility Location is:		Method of Installation			
To cros	ss right-of-way		Tunnel	Jack and Bore	
Paralle	l to right-of-way		Trench	Drill	
Overhe	ead – suspended on pol	les	Plow	Open Cut	
Underg	ead – suspended on tow ground	vers	Cased		
Other:					
Start Date	of any		Superintendent s to dates, and		
		upon comple	tion of work.	Yes	No
Do not submit բ	Please also opayment until Permitti	complete Exhib ng Authority has	_		l costs.
plicant acknowledge wn Road right-of-warees that the Town of all receive notification plicant further under aditions listed herin,	S & SIGNATURE – Pleases that (s)he has read a ay as per section 08.03 of Cottage Grove may eon of any special provisions and agrees that any special provisions,	and understands the of the Town Code establish additional ons.  If the permitted world and any and all place.	e requirements for of Ordinances. B provisions prior to k shall comply with ans, details or not	obtaining a perm y signing this app application appro n all permit provisi es attached heret	lication, applicar oval. Applicants ions and
	notify the Town Highwa	y Superintendent u	ipon completion of	work.	
By Signature of A	pplicant / Representativ	ve or Project Manaç	 ger	ite	
	1				
Print Name an	a itte		Pho	one	

#### **EXHIBIT A** CALCULATION OF RIGHT-WAY PERMIT FEES, DEPOSITS AND STANDARDS CALCULATION OF PERMIT FEES QUANTITY @ \$ PER AMOUNT A Base Fee for permit to work in Town road right-of-\$55 way is to be paid per permit prior to commencement of (Applies in all cases) work. Borings, trenching (small trenching projects) or plowing fees apply to all borings, whether under the Town roadway or parallel to the Town road (such as a boring @ \$45 per in the drainage ditch). The Town will need to review boring/trenching/plowing and monitor all boring, trenching or plowing to determine that the proposed location(s) are the best available locations in terms of the public interest in the project. An open cut pavement fee applies any time roadway pavement is impacted. If the opening is not large @ \$220 per enough for a roller compactor to be used, then a Type Il patch shall be applied. (Type II patch detail open cut drawings are available from the Town.) If the Applicant wishes to use an alternate patch type, the alternate must be approved by the Town Engineer. The Applicant shall pay the costs incurred for the Town Engineer's review of patches other than the Type II patch. A Trenching Fee is required for any trench in excess of @ \$110 x # of 1,320 feet (large trenching projects) lineal feet/1,1000 A Construction of vault or other structure fee is required for vaults or other structures placed in the @ \$110 per right-of-way. It does not apply to utility pedestals that are not installed on a concrete base. All structures vault or structure should be placed at the right-of-way line and/or adjacent to existing structures. Subtotal (Do not pay until permitting authority has evaluated Engineering fees and Deposit) For use by Permitting Authority Only **Engineering fees:** When Town Engineer review is All fees incurred by Town: Pre-payment needed, as requested by the Highway Superintendent, prepayment of estimate may required and approved by either the Town Board or the Town be required. Actual amount Chair, the Applicant shall pay all such fees incurred will be billed to the within 30 days of the invoice to the Applicant. application if it exceeds the estimate, any excess deposit Prepayment may be required in an amount and as determined by the Town Clerk-, following consultation will be refunded. with the Town Chair. **DEPOSIT** TO ASSURE PROPER CONSTRUCTION, COMPLETION. RESTORATION AND ABSENCE OF DAMAGES (see TCG s. 08.03(1)(d)2.) TOTAL FEES AND DEPOSIT DUE PRIOR TO COMMENCEMENT OF WORK

#### SEE PAGE 3 FOR IMPORTANT NOTES AND SUBMITTAL INSTRUCTIONS

**Notes regarding restoration**: All affected areas must be restored to a condition as good or better than existed prior to disruption. Restoration of trench walls shall be sloped (rather than vertical) and trench compaction shall be as good as prior to disruption. The Permit Holder shall re-use native fill materials below the pavement to the full extent possible to avoid possible differential frost heave. The Permit Holder shall notify the Highway Superintendent upon completion of work. If restoration is not complete to the satisfaction to the Highway Superintendent or Town Engineer within the time specified below, the Town may cause such restoration to occur and use the Permit Holder's deposit to pay for any costs incurred by the Town to complete the restoration.

Submit completed application and attachments using any of the following methods:

Mail to: TOWN OF COTTAGE GROVE 4058 County Road N Cottage Grove, WI 53527 Email to: clerk@tn.cottagegrove.wi.gov Fax to: 608-839-4432

### PERMIT APPROVAL BY PERMITTING AUTHORITY

The foregoing application is hereby approved and permit is issued by the Permitting Authority subject to full compliance by Applicant and Contractor with all provisions and conditions stated herein and all attachments hereto.

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Signature of Authorized Authority	Date
Print Name and Title	Phone
ALL RESTORATION WORK MUST BE COMPLETED OF COMPLETION OF THE PERMITTED WORK.	WITHIN DAYS
Additional Conditions:	