

VILLAGE OF BLUE MOUNDS
PUBLIC WORKS DEPARTMENT
PO BOX 189
BLUE MOUNDS, WI 53517
(608) 577-4694

**APPLICATION AND PERMIT FOR STREET OPENING AND/OR
TO CONSTRUCT MAINTAIN OR REPAIR WITHIN VILLAGE
ROAD RIGHT-OF-WAY - Complete sections thru ++**

STREET NAME		DATE	
LOCATION		NAME OF COMPANY	
		NAME OF REPRESENTATIVE OR PROJECT MANAGER	
CERTIFIED SURVEY NUMBER and LOT NUMBER		ADDRESS	
ESTIMATED STARTING DATE	OFFICE PHONE	CELL PHONE	
ESTIMATED COMPLETION DATE	FAX NO.	EMAIL ADDRESS	
TYPE OF STREET OPENING			
TYPE OF UTILITY INSTALLATION			
UTILITY LOCATION <input type="checkbox"/> to cross right of way <input type="checkbox"/> overhead <input type="checkbox"/> parallel to right of way <input type="checkbox"/> underground		PROPOSED METHOD OF INSTALLATION <input type="checkbox"/> TUNNEL <input type="checkbox"/> JACK & BORE <input type="checkbox"/> SUSPEND ON POLES <input type="checkbox"/> PLOW <input type="checkbox"/> CASED <input type="checkbox"/> SUSPEND ON TOWERS	

In consideration of being permitted to make such excavation, I hereby agree that I will faithfully comply with the terms of this permit, including special provisions and conditions listed below or attached hereto, and any and all plans, details or notes attached hereto and made a part thereof; that I will comply with all applicable statutes, ordinances, rules and regulation of the State of Wisconsin and the Village of Blue Mounds; that I will leave the street, alley or terrace in as good or better condition than existed prior to commencing the work; that all restoration on the street, sidewalk, alley or terrace affected by my acting upon this permit shall be completed within the (10) calendar days of the closing of the excavation; that I agree this permit may be voided by the Village Board if the work is not started within a reasonable length of time after the above stated starting date; and that I will comply with Dane County and Village of Blue Mounds ordinances and Erosion Control and Stormwater Management.

_____ DATE _____
Signature, Owner or Authorized Representative

PRINT/TYPE Full Name

DRAWING OF LOCATION AND WORK TO BE PERFORMED, TRAFFIC CONTROL PLAN, IF APPLICABLE, AND fees \$25.00 payable to the Village of Blue Mounds MUST BE SUBMITTED

- PERMIT CONDITIONS: 1) The owner or representative shall notify the **Village Office 608-437-5197 (or Public Works 608-577-4694)**, a minimum of 48 hours prior to beginning any work in public right of way.
- 2.)
3.)

SPECIAL PROVISIONS:

- 1) All open trenches shall be filled with compacted granular material.
- 2) Pavement patches shall be replaced in kind, minimum 10" crushed stone, 3 1/2" asphaltic binder cse., 1 1/2" asphaltic surface cse. Cold mix in winter (temporary) shall be replaced with hot mix in spring no later than June 1 of subsequent year
- 3) Driveways shall be 3" asphaltic concrete over 3" crushed aggregate base course (D.O.T. Gradation #3)
- 4) Terraces shall be seeded within 10 days of starting work.
- 5) All open trenches, if not paved, shall be steel plated at the end of each day's work.
- 6) All replacement items shall conform to the WI DOT Facilities Development Manual Standards or specifications as approved by the Superintendent of Public Works/Streets.
- 7) The contractor shall be responsible for providing traffic control in accordance with the latest edition Manual on Uniform Traffic Control Devices.
- 8) No road closings will be permitted without permission of the Superintendent of Public Works or designee. Other Special Provisions

PERMIT APPROVAL BY PERMITTING AUTHORITY

The foregoing application is hereby approved and permit issued by the Village of Blue Mounds subject to full compliance by the applicant with all provisions and conditions stated herein and on the reverse side hereto and all attachments hereto.

Conditional Approval _____	Public Works: 608-577-4694	DATE _____	paid \$ _____
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