

# TOWN OF GILMAN

## APPLICATION/PERMIT TO CONSTRUCT, OPERATE AND MAINTAIN UTILITIES WITHIN HIGHWAY RIGHT-OF-WAY

Applicant/Company \_\_\_\_\_  
Address \_\_\_\_\_  
Office Phone \_\_\_\_\_  
Cell Phone \_\_\_\_\_  
Plans Prepared By \_\_\_\_\_  
Preparer's Phone # \_\_\_\_\_

### LOCATION INFORMATION

Highway(s) \_\_\_\_\_  
Town/Village/City of \_\_\_\_\_  
\_\_\_\_ 1/4 of the \_\_\_\_ ¼ Sec \_\_\_\_ T \_\_\_\_ N R \_\_\_\_ E

### ADDITIONAL INFORMATION

Annual Service Connection Permit?  Yes  No  
Utility Work Order # \_\_\_\_\_

Fee Amount Required \$ \_\_\_\_\_  
(Permit fee & first 200 ft. segment parallel to centerline-\$75.  
Each additional 1000 ft. segment parallel to centerline-\$55)

### 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  Tunnel  
 Bridge attachment

**WORK TYPE:**  New construction  Improve/repair existing  Maintenance  Removal  Abandon in place

**CONSTRUCTION METHODS(S):**  Plow  Trench  Bore  Suspend on poles/towers  Open cut Hwy  Cased  
 Tree cutting/removal (fee waived)  Chemical treatment of trees/brush (fee waived)

Erosion Control Designation:  Major  Minor

Provide additional narrative if needed: \_\_\_\_\_

**UTILITY REPRESENTATIVE RESPONSIBLE FOR CONSTRUCTION:** \_\_\_\_\_  
**PHONE NUMBER:** \_\_\_\_\_

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 township 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 noted attached hereto and made apart thereof.

By: \_\_\_\_\_ (signature of Applicant/Company Authorized Representative) \_\_\_\_\_ (Title) \_\_\_\_\_ (Date)

(Typed/Printed Name of Person signing above or electronic Signature Code) (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 township including the Indemnification as included in 96.03 of the WCHA Utility Accommodations Policy in effect on the date of this application.

Supplemental Provisions Attached:  Yes  No  
By: \_\_\_\_\_  
(Representative for Gilman Township)  
\_\_\_\_\_  
(Title) (Date)

**FEE RECEIVED:** \$ \_\_\_\_\_  
**CHECK NUMBER:** \_\_\_\_\_  
**DATE ISSUED:** \_\_\_\_\_  
**PROJECT #:** \_\_\_\_\_  
**PERMIT NUMBER:** \_\_\_\_\_