

**TOWN OF OCONTO APPLICATION/PERMIT TO CONSTRUCT, OPERATE, AND MAINTAIN UTILITIES WITHIN TOWN OF OCONTO RIGHT-OF-WAY**

**PERMIT FEE: \$100.00**

Applicant/Company: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 \_\_\_\_\_  
 Plans Prepared By: \_\_\_\_\_  
 Preparer Phone: \_\_\_\_\_  
 Preparer Email: \_\_\_\_\_

LOCATION INFORMATION	
Highways(s) _____	
Town/Village/City of: _____	
_____ 1/4 of the _____ 1/4 Sec ___ T ___ N ___ R ___ E	
ADDITIONAL INFORMATION	
Annual Service Connection Permit? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Utility Work Order# _____	
Fee Required? <input type="checkbox"/> Yes <input type="checkbox"/> No Amount \$ _____	

**DESCRIPTION OF PROPOSED WORK (Check & fill out all the apply)**

UTILITY TYPE  Electric  Gas/petroleum  Communications  
 Water  Sanitary sewer  Private line  
 Transmission  Distribution  Service facility size/capacity \_\_\_\_\_

ORIENTATION:  Overhead  Underground  Parallel to hwy centerline  
 Hwy crossing  Bridge attachment  Tunnel

WORK TYPE:  New construction  Improve/repair existing  Maintenance  
 Removal  Abandon in place  Plat Map Attached - Required

CONSTRUCTION METHODS:  Plow  Trench  Bore  
 Suspend on poles/towers  Open cut hwy  
 Cased  Tree cutting/removal  Chemical treatment-Trees/Brush

Erosion Control Designation:  Minor  Major

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

NAME & PHONE NUMBER OF UTILITY REPRESENTATIVE RESPONSIBLE FOR CONSTRUCTION

Estimated start date: \_\_\_/\_\_\_/\_\_\_ Estimated completion/restoration date: \_\_\_/\_\_\_/\_\_\_

The applicant understands and agrees that the permitted work shall comply with all permit provisions & conditions of the Utility Accommodation Policy of the above-named county in effect at the time of this application and with any special provisions listed below or attached hereto, and any plan, details, or notes attached hereto and made a part thereof.

By: \_\_\_\_\_ (Signature of Applicant/Co. Authorized Representative) \_\_\_\_\_ (Title) \_\_\_\_\_ (Date)

(Type/print name of person signing above or electronic signature code) (Authorized applicant. Co. Rep. Phone no.)

**Please email completed permit to: [clerktownoconto@gmail.com](mailto:clerktownoconto@gmail.com) or mail with payment of \$100 to Clerk, Town of Oconto, 3649 Hwy 22, Oconto, WI 54153**  
**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 county including the Indemnification as included in 96.03 of the WCHA Utility Accommodation Policy in effect on the date of this application.

Supplemental Provisions Attached:  Yes  No

By: \_\_\_\_\_ Date \_\_\_\_\_  
 Town of Oconto Representative

Comments/Special Provisions: \_\_\_\_\_

FEE RECEIVED: \$ _____
CHECK NO.: _____
DATE PMT REC'D: ___/___/___
PERMIT NO. _____
APPROVED PERMIT SENT VIA: _____