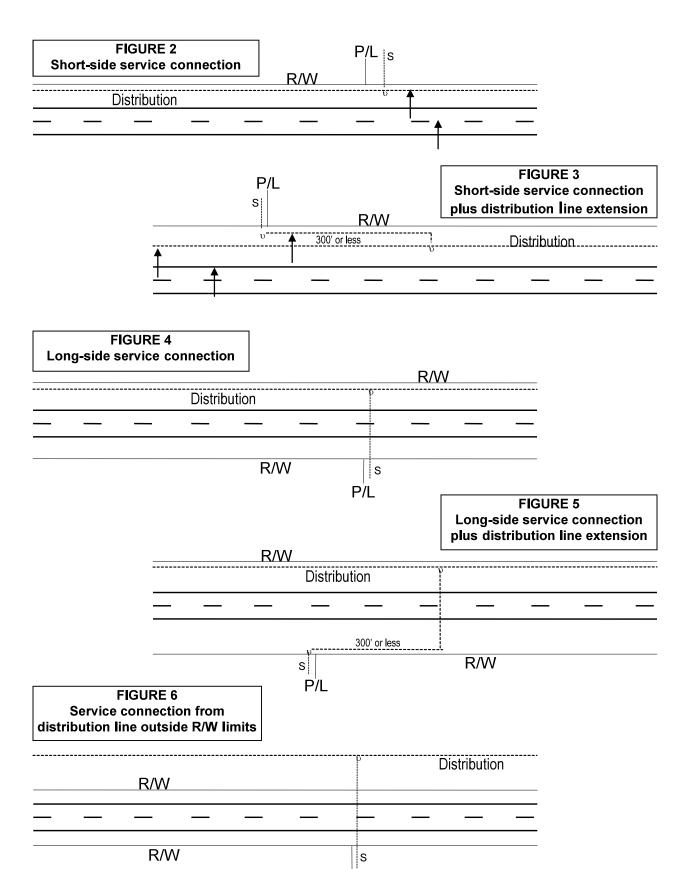
## FIGURE 1

TOWN OF MOSINEE	LOCATION INFORMATION
APPLICATION/PERMIT to CONSTRUCT, OPERATE, and MAINTAIN UTILITIES WITHIN HIGHWAY RIGHT-OF-WAY	Highway(s):
Applicant/Company:	
Address:	¼ of the¼ SecTN R E
Office Phone:	ADDITIONAL INFORMATION
Local Phone & Pager:	Annual Service Connection Permit? ☐Yes ☐No
Plans Prepared By:	Utility Work Order #
Preparer's Phone:	Fee Required? ☐Yes ☐No Amount \$
DESCRIPTION OF PROPOSED WORK (Check and fill out all that app	ly)
UTILITY TYPE:	
	(diameter, # fibers, psi, Kv, etc.) terline ☐ Hwy crossing ☐ Bridge attachment ☐ Tunnel ntenance ☐ Removal ☐ Abandon in place uspend on poles/towers ☐ Open cut hwy ☐ Cased  Erosion Control Designation: ☐ Major ☐ Minor
NAME AND PHONE NUMBER OF UTILITY REPRESENTATIVE RESPONSIBLE FOR CONSTRUCTION:	
Estimated Starting Date:Estimated Comple	etion/Restoration Date:
The Applicant understands and agrees that the permitted work shall comeffect at the time of this application, and with any special provisions list attached hereto and made a part thereof.	
By:	
(Signature of Applicant/Company Authorized Representative)	(Title) (Date)
(Typed/Printed Name of Person Signing Above or Electronic Signature Code) (Aut	chorized Applicant/Company Representative Telephone Number)
DO NOT WRITE BE	ELOW THIS LINE
<b>PERMIT APPROVAL BY PERMITTING AUTHORITY</b> The foregoing application is hereby approved and permit issued by the F provisions and conditions stated in the Town Ordinances including the I this application.	Permitting Authority subject to full compliance by the Applicant with all ndemnification as included in the Ordinances in effect on the date of
Supplemental Provisions Attached:YesNo	FEE RECEIVED: \$
By:	CHECK NUMBER:
(Authorized Representative for Town)	DATE ISSUED:
(Title) (Date)	
	HWY PROJECT #: ————
Date Revised: 3/9/2023	PERMIT NUMBER:



P/L