Right of Way and Excavation Permit	Permit No: Date:

Registration Information _____

Registrant's Name: _____ Address of Work: _____, Bayside WI

Email: _____ Phone:_____

Digger's Hotline Registration Certificate Number: _____

Doing work for:_____

Emergency Contact Information:_____

In detail, describe the work being done:_____
_____
_____

Purpose of work: _____

Will there be any excavation?: Yes / No
Number of excavations:_____
Location of excavations:_____

Will there be any street cuts: Yes / No _____ sq. ft.
Location of street cuts:_____
Road/ Lane closure: Yes / No
If yes, Location:_____
        *A traffic plan **must** be submitted showing signage details if road/lane closures are happening.*

Project start date: _____ Estimated project end date: _____
Project must start within one month of approval.

OTHER REQUIRED INFORMATION. Applicants must provide the following at time of application:

REQUIRED ATTACHMENTS(if not previously provided and current):	**Received/ Satisfactory:**
a. Scaled drawings showing location and area of proposed project, location of all existing and proposed facilities, and a traffic plan.	
b. Payment of all permit fees and costs.	
c. Proof of Liability insurance in a type and amount satisfactory to the department.	
d. Repair bond as determined by the department.	

	Permit No:
	Date:

FEES AND COSTS:

Right of Way Fee: **$100.00** ☐   Excavation Fee: **$200.00** ☐

If performing a Street Cut/Daylight, a refundable bond/deposit will be required.
☐ Less than 100 square feet: $400 and a $1,000 road bond.
☐ 100-500 square feet: $500 and a $3,000 road bond.
☐ Over 500 square feet: $600 and a $5,000 road bond.

SPECIAL CONDITIONS:

☐ Restore area to current or better condition immediately following project completion.

☐ Other:

☐ If necessary, road repairs immediately following project completion.

Applicant understands and agrees that the permitted work shall comply with all permit excavation provisions and conditions of Bayside Municipal Code and any special conditions attached hereto, and any plans, details, or notes attached hereto and made a part of thereof. Failure to comply with any regulations and/or conditions in this permit will make the permit null and void. **Permit is valid for one year.**

Applicant Signature:_____ Date:_____

Application is: Approved/ Not Approved   Village Manager or Designee:_____

Date Approved:_____   Special Conditions Attached: Yes/ No