Right of Way Occupancy and Excavation Permit

Permit No:	
Date:	



Registration Information		
Registrant's Name:	_ Phone:	
Address of work:, Bayside WI	Fax:	
Diggers Hotline Registration Certificate Number:	_ E-Mail:	
Local Representative:	Phone:	
Emergency Contact Information:		
Briefly describe the work being done:		
Will there be any excavation?		
Will there be any street cuts? If so, what is the approximate square footage of the cut?		
OTHER REQUIRED INFORMATION. Applicants must provide the following at time of application:		
REQUIRED ATTACHMENTS (if not previously provided and current):	-	
a. Scaled drawings showing location and area of proposed pro	ject and location	
of all existing and proposed facilities.		
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.		
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: \$300 and a \$1,000 road bond • 100 – 500 square feet: \$400 and a \$3,000 road bond • Over 500 square feet: \$600 and a \$5,000 road bond		
Applicant understands and agrees that the permitted work shall comply with all permit 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 thereof. Failure to comply with any regulations and/or conditions in this permit will make the permit null and void.		
Applicant Signature	Date	
Application is: Approved/Not Approved	Special Conditions Attached: Yes/No	
Village Manager or Designee:	Tax Key Number:	