



Town of Buchanan

N178 County Road N
 Appleton, WI 54915
 Phone: 920.734-8599

UTILITY RIGHT-OF-WAY EXCAVATION PERMIT APPLICATION

Applicant/Utility Company Information			
Applicant Name (Indiv., Org. or Entity)	Authorized Representative	Title	
Mailing Address	City	State	Postal Code
E-mail Address	Telephone (include area code)	Fax (include area code)	
Contractor Information (if different than Applicant)			
Name (Organization or Entity)	Contact Person	Title	
Mailing Address	City	State	Postal Code
E-mail Address	Telephone (include area code)	Fax (include area code)	
Other Contact Information (check one): <input type="checkbox"/> Engineer / Consultant <input type="checkbox"/> Field Representative			
Name (Organization or Entity)	Contact Person	Telephone (include area code)	
Mailing Address	City	State	Postal Code
General Project Information			
Project Start Date:	Utility Type: <input type="checkbox"/> Electric <input type="checkbox"/> Gas/Petroleum <input type="checkbox"/> Communications <input type="checkbox"/> Water <input type="checkbox"/> Sanitary/Storm <input type="checkbox"/> Private Line		
Project Completion/Restoration Date:			
Orientation <input type="checkbox"/> Overhead <input type="checkbox"/> Underground	Construction Method(s): <input type="checkbox"/> Trench/Plow <input type="checkbox"/> Bore <input type="checkbox"/> Suspend <input type="checkbox"/> Open Cut Road		
Permit Fees (check all that apply)			
<input type="checkbox"/> Open Cut Excavation Fee : _____ Open Cuts x \$1,500.00	<input type="checkbox"/> Linear Foot Fee : _____ / Ft. x \$0.10 per ft.		
<input type="checkbox"/> Boring Fee : _____ Borings x \$ 100.00	<input type="checkbox"/> Closure Fee : _____ Closures x \$100.00 / _____ day(s)		
ROW Excavation Permit Application Fee + \$			\$75.00
Total (All Applicable Fees) = \$ _____			
Required Forms Checklist: (Submit two (2) copies of all supporting materials, i.e., drawings, plans and written documents)			
<input type="checkbox"/> Detailed Project Plan <i>(All applicants)</i>	<input type="checkbox"/> Completed Erosion Control Plan/Permit <i>(When applicable)</i>		
<input type="checkbox"/> Certificate of Insurance <i>(All applicants)</i>	<input type="checkbox"/> Detailed Traffic Control Plan <i>(When applicable)</i>		
Acknowledgement, Certification & Permission			
Acknowledgement: I ACKNOWLEDGE FAILURE TO PROVIDE ALL REQUIRED MATERIALS AND INFORMATION COULD RESULT IN THE REVIEW OF THIS APPLICATION BEING DELAYED FOR CONSIDERATION.			
Certification: The applicant has received and agrees that the permitted work shall comply with all permit provisions and conditions of the Town of Buchanan Municipal Code Ch 282 - Excavations in effect at the time of this application, and with any special provisions listed below or attached hereto, and any all plans, details, or notes attached hereto and made a part thereof.			
Applicant/Company Authorized Signature		Date Signed	
Typed/Printed Name of Person Signing Above		Authorized Applicant/Company Representative Telephone:	
LEAVE BLANK – FOR TOWN USE ONLY			
Date Application Received:	Fee Received \$	Receipt No:	
Engineer's estimate to install and maintain erosion control: \$	Estimate Cost to provide Inspection:		\$
Construction Site ID / Permit No:	Date Issued:	Issued By:	

Permit Expires: _____