



# Wood County

## WISCONSIN

OFFICE OF  
HIGHWAY COMMISSION

*Roland Hawk*  
COMMISSIONER

### APPLICATION TO WORK IN A WOOD COUNTY HIGHWAY RIGHT OF WAY

Chapter 86.07(2) of Wisconsin State Statutes provides that the authority maintaining the highway issue a permit before any excavation or fill.

<p style="text-align: center;"><b><u>Name &amp; Mailing Address of Landowner</u></b></p> <p>_____</p> <p>_____</p> <p>_____</p> <p><b><u>Phone Number</u></b> _____</p>	<p style="text-align: center;"><b><u>Property Information</u></b></p> <p>Parcel ID: _____</p> <p>Property address where work is to be performed</p> <p>_____</p> <p>_____</p>
<p style="text-align: center;"><b><u>Name &amp; Mailing Address of Authorized Representative</u></b></p> <p>_____</p> <p>_____</p> <p>_____</p> <p><b><u>Phone Number</u></b> _____</p>	<p style="text-align: center;"><b><u>Right of Way Location</u></b></p> <p><b>East / West / North / South</b> side of CTH _____,</p> <p>_____ miles <b>East / West / North / South</b> of</p> <p>_____ (nearest road)</p> <p>*Please provide a map with application</p>
<p style="text-align: center;"><b><u>Description of Work to be Completed in the Right of Way</u></b></p> <p>Anticipated Start Date: _____ Anticipated Completion Date: _____</p> <p>Describe the type of work to be completed in the right of way:</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p>	
<p>Who is the work going to be completed by?: <input type="checkbox"/> Property Owner <input type="checkbox"/> Contractor - Provide contact information on back of application</p>	
<p><input type="checkbox"/> Work in Right of Way permit fee \$350 (\$50 fee*, \$300 deposit**)</p> <p><input type="checkbox"/> After the Fact Permit \$400 (non-refundable)</p>	

PERMIT APPROVAL (To be completed by Highway Department)

<b>Recommended by Highway Superintendent</b>	<b>Date</b>	<b>Permit Number</b>	Wood County Highway Department 555 - 17 <sup>th</sup> Avenue North Wisconsin Rapids WI 54495
<b>Wood County Highway Commissioner</b>	<b>Date</b>	<b>Fee</b>	<input type="checkbox"/> Paid Check # _____ <input type="checkbox"/> Paid Cash

Permit Conditions:

1. Applicant shall place a flag or marker in the highway right-of-way visible from the highway at the location of the proposed work.
2. Any permit issued is superseded by the local zoning authority. Working without their approval is illegal and cancels any permit resulting from this application.
3. If the work described is not completed by the "Anticipated Completion Date", the permit can be renewed one time.
4. Additional fees may be assessed by the Highway Commission.
5. Property owners are responsible for marking any private facilities/apertures. (Diggers Hotline will not locate)
6. Wood County Highway is not responsible for replacing or maintaining any private facilities/apertures, placed in the right-of-way, due to routine maintenance or construction.

TO BE COMPLETED BY HIGHWAY DEPARTMENT			
Post-Work Inspection	Deductions for Subsequent Re-Inspections		
	# of Visits	6 Month Extension	Total Deduct

**• Failure to comply with Wood County’s access control ordinances can result in a penalty of not less the \$50 and not more than \$500 per Wisconsin Statute 86.07(2)(a)**

\*Work in right of way: \$50 Fee includes one post – project inspection.

\*\*\$300 project deposit will be returned to owner upon acceptance of completed work. The following exceptions will apply:

- \$50 will be deducted from the deposit for each re-inspection if the work is unacceptable. The remainder will be returned to owner.
- If the work is unacceptable and Wood County has to correct the faulty work, the deposit will be forfeited by the owner and actual costs for corrections shall be borne by the applicant.
- \$50 will be deducted for one six-month permit extension.

**Make checks payable to Wood County Highway Commission and mail to:**

Wood County Highway Department  
 555 17<sup>th</sup> Avenue North  
 Wisconsin Rapids, WI 54495

**Landowner or Authorized Representative’s signature:** \_\_\_\_\_  
 (Signature) (Date)

**E-Mail (Please Print)** \_\_\_\_\_

If you are using a contractor please provide contact information below.

Contracted Company \_\_\_\_\_

Company Address \_\_\_\_\_

Company Phone Number \_\_\_\_\_