

CITY OF STURGEON BAY

STREET OPENING PERMIT APPLICATION

I HEREBY MAKE APPLICATION FOR A STREET OPENING PERMIT AS REQUIRED BY CHAPTER 8.05 OF THE MUNICIPAL CODE OF THE CITY OF STURGEON BAY.

Owner of Premises Telephone
Address of Street Opening
Mailing Address of Owner
Contractor Telephone
Mailing Address of Contractor
Reason for Opening Street

DEPOSIT CALCULATION

SQUARE FEET OF FINISHED SURFACE TO BE REMOVED:

Table with 4 columns: Description, Unit, Rate, and Total. Rows include Linear Feet of Curb & Gutter, Square Feet of Street or Alley Surface, Square Feet of Sidewalk Surface, and a TOTAL row.

CERTIFICATE OF APPLICATION

I HEREBY CERTIFY THAT I AM FAMILIAR WITH AND WILL CONFORM TO ALL REQUIREMENTS OF THE CITY OF STURGEON BAY CODE (8.05 - EXCAVATIONS) COVERING THE WORK FOR WHICH THIS PERMIT IS REQUESTED, AND THAT REPAIRS MUST BE COMPLETED NOT EARLIER THAN 15 DAYS NOR LATER THAN 30 DAYS FROM DATE OF EXCAVATION.

(Signature of Applicant)

CERTIFICATE OF OWNER

I HEREBY CERTIFY THAT I WILL ABIDE BY THE REQUIREMENTS OF SECTION 8.05 (EXCAVATIONS) OF THE MUNICIPAL CODE OF THE CITY OF STURGEON BAY AND AGREE THAT IF THE COST OF THE SURFACE RESTORATION EXCEEDS THE AMOUNT OF DEPOSIT THAT I WILL BE RESPONSIBLE FOR PAYMENT OF A SAID BALANCE (IF PAYMENT IS NOT MADE WITHIN 30 DAYS OF BILLING, THE BALANCE WILL BE CARRIED ON THE TAX ROLL AS A SPECIAL TAX AGAINST THE PROPERTY IN ACCORDANCE WITH 62.14(6)C WISCONSIN STATUTES).

(Signature of Owner)

PERMIT IS HEREBY ISSUED FOR THE STREET OPENING AS DESCRIBED ABOVE AND IS TO BE COMPLETED IN ACCORDANCE WITH SECTION 8.05 (EXCAVATIONS) OF THE MUNICIPAL CODE OF THE CITY OF STURGEON BAY.

PERMIT APPLICATION RECEIVED / / DEPOSIT CALCULATION = \$
PERMIT ISSUED / / PERMIT FEE = \$
RECEIPT NUMBER TOTAL FEE & DEPOSIT = \$

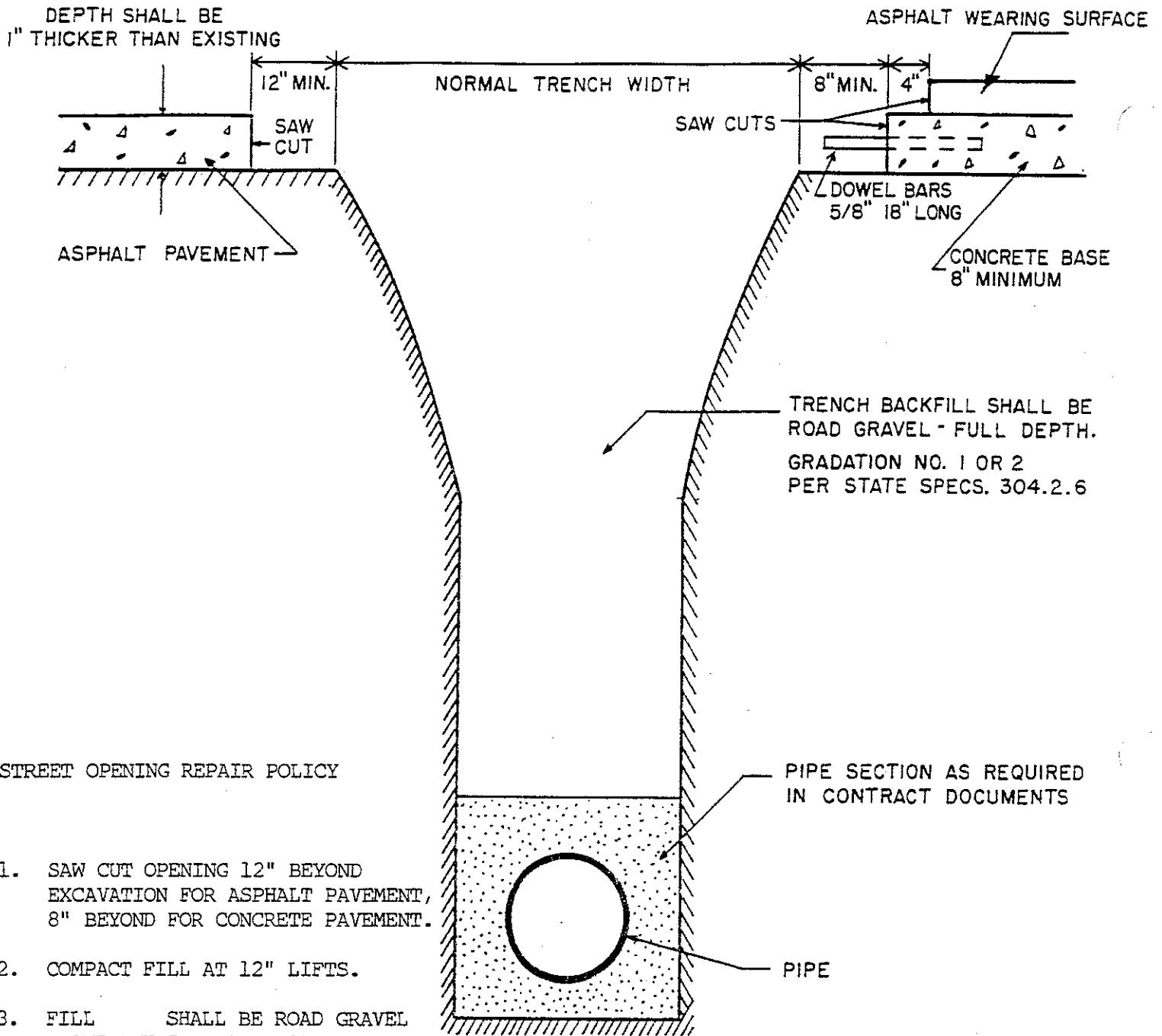
(City Representative / Title)

FOR OFFICE USE ONLY

REQUIRED SIGNITURES

City Representative / Title
REFUND DUE COPY OF PERMIT SENT TO PROPERTY OWNERS
BALANCE DUE COPY DELIVERED TO CONTRACTOR
TOTAL CHARGE SITE SUITABLY CLOSED
BILLING SENT TO PROPERTY OWNER FOR BALANCE DUE RECEIPT NUMBER

Public Works Superintendent



STREET OPENING REPAIR POLICY

1. SAW CUT OPENING 12" BEYOND EXCAVATION FOR ASPHALT PAVEMENT, 8" BEYOND FOR CONCRETE PAVEMENT.
2. COMPACT FILL AT 12" LIFTS.
3. FILL SHALL BE ROAD GRAVEL ABOVE ANY SAND OR WASHED STONE BEDDING.
4. DURING THE PERIOD FROM NOV. 1ST TO APRIL 30TH, OPENINGS MUST BE COVERED WITH COLD MIX, UNLESS THEY ARE HOT PATCHED.
5. PERMITTEE IS REQUIRED TO MAINTAIN TRENCH AND TEMPORARY SURFACE UNTIL PERMANENT PATCH IS IN PLACE.
6. HOT PATCH MUST BE 1" HEAVIER THAN ORIGINAL ON ALL STREETS. EACH LIFT OF ASPHALT MUST NOT EXCEED 2 1/2".

**TYPICAL CUT PAVEMENT
TRENCH SECTION**