

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 3 columns: Description (LINEAR FEET OF CURB & GUTTER, SQUARE FEET OF STREET OR ALLEY SURFACE, SQUARE FEET OF SIDEWALK SURFACE), Rate (x \$20.00/LINEAR FT., x \$4.40/SQ. FT., x \$4.40/SQ. FT.), and Total (TOTAL). Includes a TOTAL row at the bottom.

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) 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 = \$

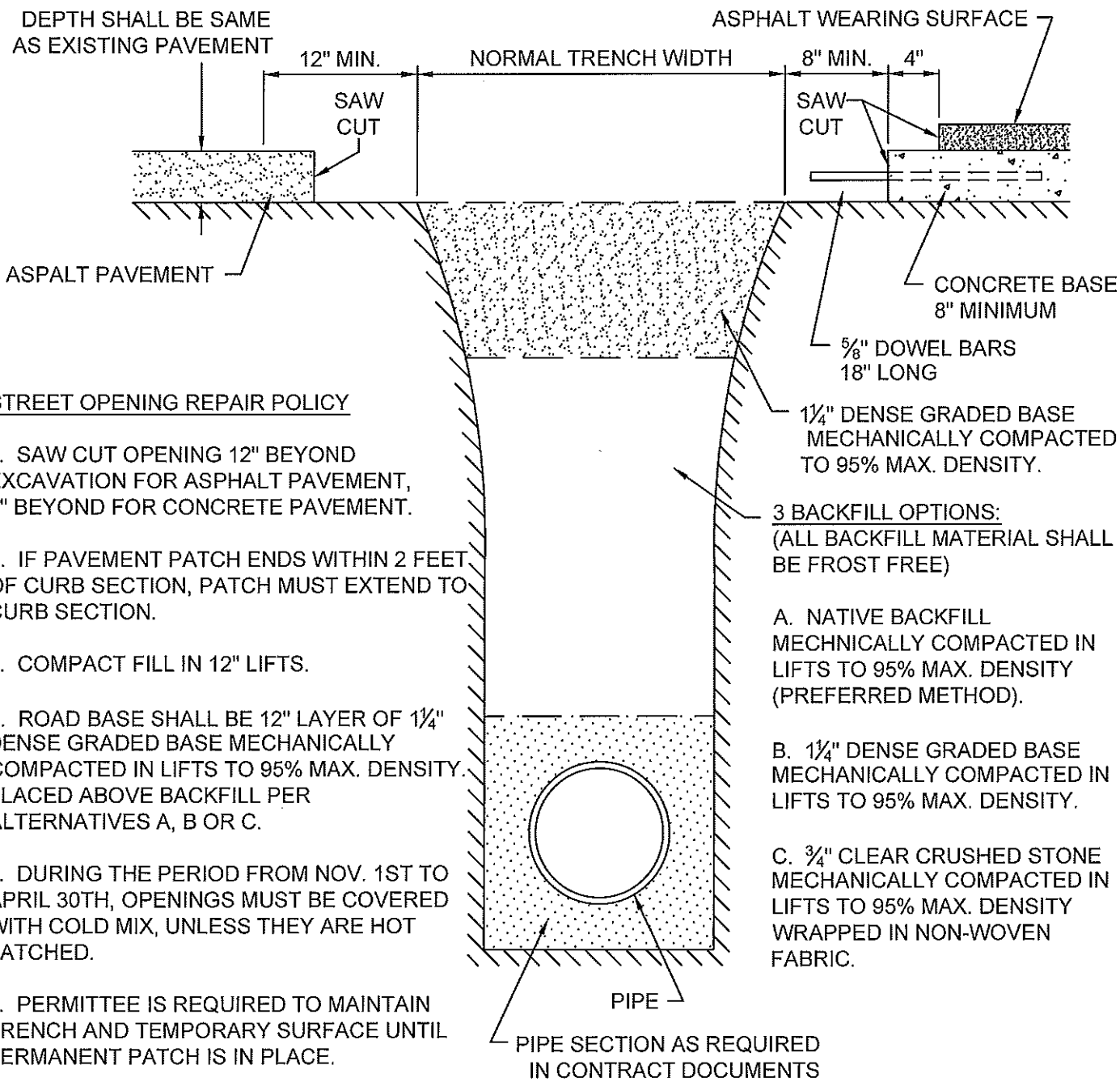
(City Representative / Title)

FOR OFFICE USE ONLY

REQUIRED SIGNATURES

City Representative / Title COPY OF PERMIT SENT TO PROPERTY OWNERS
REFUND DUE COPY DELIVERED TO CONTRACTOR
BALANCE DUE SITE SUITABLE CLOSED
TOTAL CHARGE Public Works Superintendent

BILLING SENT TO PROPERTY OWNER FOR BALANCE DUE RECEIPT NUMBER



**STREET OPENING REPAIR POLICY**

1. SAW CUT OPENING 12" BEYOND EXCAVATION FOR ASPHALT PAVEMENT, 8" BEYOND FOR CONCRETE PAVEMENT.
2. IF PAVEMENT PATCH ENDS WITHIN 2 FEET OF CURB SECTION, PATCH MUST EXTEND TO CURB SECTION.
3. COMPACT FILL IN 12" LIFTS.
4. ROAD BASE SHALL BE 12" LAYER OF 1 1/4" DENSE GRADED BASE MECHANICALLY COMPACTED IN LIFTS TO 95% MAX. DENSITY PLACED ABOVE BACKFILL PER ALTERNATIVES A, B OR C.
5. DURING THE PERIOD FROM NOV. 1ST TO APRIL 30TH, OPENINGS MUST BE COVERED WITH COLD MIX, UNLESS THEY ARE HOT PATCHED.
6. PERMITTEE IS REQUIRED TO MAINTAIN TRENCH AND TEMPORARY SURFACE UNTIL PERMANENT PATCH IS IN PLACE.
7. HOT PATCH MUST BE SAME THICKNESS AS ORIGINAL ON ALL STREETS. EACH LIFT OF ASPHALT MUST NOT EXCEED 2 1/2".
8. CORE HOLES NOT ALLOWED IN BLACKTOP PAVEMENT OR CONCRETE SIDEWALK, CURB OR DRIVEWAY APRONS.
9. CORE HOLES ALLOWED IN CONCRETE PAVEMENT IF EPOXIED.

- 1 1/4" DENSE GRADED BASE MECHANICALLY COMPACTED TO 95% MAX. DENSITY.
- 3 BACKFILL OPTIONS: (ALL BACKFILL MATERIAL SHALL BE FROST FREE)
  - A. NATIVE BACKFILL MECHANICALLY COMPACTED IN LIFTS TO 95% MAX. DENSITY (PREFERRED METHOD).
  - B. 1 1/4" DENSE GRADED BASE MECHANICALLY COMPACTED IN LIFTS TO 95% MAX. DENSITY.
  - C. 3/4" CLEAR CRUSHED STONE MECHANICALLY COMPACTED IN LIFTS TO 95% MAX. DENSITY WRAPPED IN NON-WOVEN FABRIC.

**ON-SITE CITY INSPECTION  
REQUIRED FOR ALL  
EXCAVATIONS PRIOR TO  
BACKFILLING  
CALL: 920-746-2912  
MON-FRI 7:00 AM-3:30 PM**

CITY OF STURGEON BAY  
TYPICAL CUT PAVEMENT  
TRENCH SECTION  
FEB, 2018 NOT TO SCALE