

Village of Whitefish Bay
5300 North Marlborough Drive
Whitefish Bay, Wisconsin 53217
Phone (414) 962-6690
Fax (414) 962-5651

Right of Way Permit

Permit
Number

Tax Key

Applicant

Name _____
Address _____
Telephone# _____
Cell# _____
Fax # _____
Email _____

Contractor

Name _____
Address _____
Telephone # _____
Cell # _____
Fax # _____
Email _____

SAMPLE

Description of Work to Be Performed:

Address/Location of Work Area

Permit Agreement

Applicant agrees to meet and comply with all permit requirements and conditions including, but not limited to, ordinances of the Village of Whitefish Bay and State and Federal Laws. Permit Holder further agrees to indemnify and Hold Harmless the Village of Whitefish Bay, its agents and assigns for any and all expenses, claims and damages resulting from the permitting of this work.

Signature _____

Date _____

Requested Work Dates

Application Date _____
Desired Start Date _____
Est. Completion Date _____

24 Hour Emergency Contact Information

Contact Person's Name _____
Contact Person's Telephone # _____

Gray Shaded Areas to be completed by Village Staff

Cost

Permit Fee \$ 60
Other Fee \$ _____
(See Special Conditions)
Deposit Required \$ _____

TOTAL \$ _____

NON-Refundable FEE

\$60 Permit Fee
\$60 Re-inspect Fee
Deposit
\$1000 MIN. Deposit Req.
\$60 /LF Streets & Alleys
\$60 /LF Sidewalk
\$30/ LF Parkway

Provided

- Signed Permit Agreement
- Fee & Deposit
- Certificate of Insurance
- Sketch of Area
- Detail Drawings
- Material Submittals
- Construction Methods
- Barricade Traffic Control Plan
- Other _____

Required

- X
- X
- X
- X
-
-
-
-
-

Special Conditions of Permit Approval:

Additional Special
Conditions Attached

Approval

Approved Start Date _____
Approved Completion Date _____

Approved By, Village Engineer _____ Date _____