



*Application and Record
For
Street Opening Permit*

Application is hereby made to the Department of Public Works of the City of Adams, for permission to excavate, dig tunnel, or perform other work further described in this application, upon a street right-of-way, or Public Property, in the City of Adams.

Permit Fee: \$50/Opening

Emergency Excavation

Date of Application: _____

Name of Applicant: _____

Address of Applicant: _____

Phone: (____) _____ - _____

If application is being made on behalf of a company, firm or corporation, the person submitting this application shall fill out the following:

Name and Title of Representative: _____

Address of Representative: _____

Phone: (____) _____ - _____

Street opening permit is being requested for the purpose of:

Location of Proposed work:

Estimated Opening Date: _____ Estimated Closing Date: _____

Type of Surface: _____ Estimated Size of Closing: _____

Estimated Cost of Repairs: _____ Repairs Completed By: _____

I acknowledge the contents of Section 6-2-3 & 6-2-4 of the City of Adams Municipal Code of Ordinance. It is understood that I/or my Company agree to comply with said Ordinances. It is further understood that, I, the undersigned have authority to enter into this application agreement on behalf of the above-named company, firm, or corporation.

I certify that the information I have provided in this application is true and accurate.

Print Name: _____

Signed: _____ Date: _____
Applicant/Agent/Owner

Date filed with City Clerk _____ Received By: _____

\$50.00 Fee Paid

Include a copy of plans for proposed work with application.

Make check payable to and submit to: City of Adams
PO Box 1009
Adams, WI 53910

Approved by: _____
Street Superintendent

Date: _____