

Office Use

Permit No. \_\_\_\_\_

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Permit Expiration Date: \_\_\_\_\_

\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_

**TOWN OF LOMIRA**

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**TEMPORARY**

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**ROAD RIGHT-OF-WAY PERMIT**

FEE: \$ 50.00

Office Use

Fee Paid

Landowners Notified

**Applicant:** \_\_\_\_\_ **Date:** \_\_\_\_\_

Current Mailing Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Email: \_\_\_\_\_

**Subcontractor Name/Address** \_\_\_\_\_

**Location or Route(s) (mark on attached map):** \_\_\_\_\_

**Description of Work:** \_\_\_\_\_

**Approximate Dates of Use:** \_\_\_\_\_

Permit fee is payable to the town treasurer of the Town of Lomira by the applicant on or before issuance of the permit by the town board.

The applicant hereby agrees that the work shall be done subject to such terms and conditions as may be prescribed by the Town pursuant to Wis. Stat. § 86.16 and be performed and completed to its satisfaction, and in the case of temporary alterations that the highway or bridge shall be restored to its former condition, and that the applicant shall be liable to the Town, as the case may be, for all damages which occur during the progress of said work or as a result thereof.

**Applicant Signature:** \_\_\_\_\_ **Date:** \_\_\_\_/\_\_\_\_/\_\_\_\_

**Sub-Contractor Signature:** \_\_\_\_\_ **Date:** \_\_\_\_/\_\_\_\_/\_\_\_\_

**Office Use**

Additional Terms and Conditions per Town of Lomira: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Permit to perform work as stated on this application is hereby approved  denied

Chair Signature: \_\_\_\_\_ Date \_\_\_\_/\_\_\_\_/\_\_\_\_

Permit issued by: Clerk Signature \_\_\_\_\_ Date \_\_\_\_/\_\_\_\_/\_\_\_\_

**Mail to: Town of Lomira, Sharon Belling, Clerk, N10482 Center Dr., Lomira, WI 53048**