

# CITY OF OCONTO

## EXCAVATION & RIGHT-OF-WAY PERMIT APPLICATION



All Work performed under this permit shall be in accordance with City Ordinances and directed by the Inspection Department (Section 6-2-3 and 6-2-4). Ordinance requirements are attached.

Location of proposed work \_\_\_\_\_

Parcel #: RH \_\_\_\_\_ Property Zoned: \_\_\_\_\_ Application Date: \_\_\_\_\_

Property Type:  One & Two Family  Multi-Family # \_\_\_\_\_  Commercial  Industrial  C-B  Conservation

**Property Owner's Name:** \_\_\_\_\_

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

Telephone: \_\_\_\_\_ Cell: \_\_\_\_\_

<input type="checkbox"/> SIDEWALK <input type="checkbox"/> Remove	<input type="checkbox"/> CURB & GUTTER <input type="checkbox"/> Repair	<input type="checkbox"/> DRIVEWAY <input type="checkbox"/> New
<input type="checkbox"/> STREET OPENING - Street Name: _____		
<input type="checkbox"/> TREE - <input type="checkbox"/> Plant <input type="checkbox"/> Remove		
<input type="checkbox"/> EXCAVATION - Area in size to be excavated: _____ sf		
<input type="checkbox"/> Road Bore <input type="checkbox"/> Footing and Foundation Only		

*Who is responsible for repairing opening?* (Which must be maintained per City Ordinance 6-2-4 (f) for a period of 1 year)

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Telephone: \_\_\_\_\_ Cell: \_\_\_\_\_

<b>Contractor:</b> _____
<b>Address:</b> _____
<b>Telephone:</b> _____ <b>Cell:</b> _____

SIGNATURE: \_\_\_\_\_ Date: \_\_\_\_\_  
 Owner  Contractor  General Contractor