

VILLAGE OF CALEDONIA 5043 CHESTER LANE • RACINE, WI 53402 • PHONE (262) 835-6475

Permit No.

Parcel No.

ROAD OPENING PERMIT APPLICATION

Receipt	No.

CALEDONIA PERMITAPPLICA	TION			
Owner / Applicant Name	Owner / Applicant Email			
Owner / Applicant Mailing Address, City, State & Zip	L	Owner / Applicant Phone		
		()		
Contractor Name	Contractor Email			
Contractor Mailing Address, City, State & Zip		Contractor Phone		
		()		
Bond Poster Name	Bond Poster Email	<u> </u>		
Bond Poster Mailing Address, City, State & Zip		Bond Poster Phone		
Bond Poster Manny Address, Oity, State & Zip				
PROJECT ADDRESS:				
REQUIREMENTS / PERMIT SUBMITTAL ITEMS				
1.) TYPE OF WORK PROPOSED		_		
Culvert Over Head	Sev	wer Lateral		
Shoulder Opening Only Open Cut	Wa Wa	ter Lateral		
Jack or Bore Cross Right of Way	Oth Oth	er 🗌		
2.) DESCRIPTION OF WORK (Include plans & specifications)				
PERMIT APPROVAL				
*The foregoing application will be reviewed by the Village Engineer or his/her designee(s), subject to full compliance by the applicant with Section				
18-1-16 of the Code of Ordinances of the Village of Caledonia and subject to the following special provisions and all attachments hereto.*				
*The bond or letter of credit shall remain in full force and effect for one (1) year	ar from the date of the Village's f	inal inspection after completion of the		
project.*				
SIGNATURE OF AUTHORIZED REPRESENTATIVE		Date:		
FEES & BOND TYPE:		PE: (Attach copy of receipt)		
Permit Fee\$100.00 each	Cash	S Date:		
Letter of Credit		Duto		
_	Check #] \$ Date:		
Cash Bond\$500.00 each	Credit / Debit] \$ Date:		
Waived				
Contact Engineering Department @262 925 6429 for inc	pactions, permit conditions and a	additional information		
Contact Engineering Department @262-835-6428 for inspections, permit conditions and additional information.				