# JACKSON COUNTY HIGHWAY DEPARTMENT

APPLICATION/PERMIT TO CONSTRUCT, MAINTAIN,

AND OPERATE UTILITIES WITHIN HIGHWAY RIGHT-OF-WAY

Applicant/Company: _____

Address: _____

_____

Office Phone: _____

Local Phone & Pager: _____

Plans Prepared by: _____

Preparer's Phone: _____

**LOCATION INFORMATION**

Highway(s): _____

Town / Village / City of:

_____

____ ¼ of the ____ ¼ Sec._____, T ____ N, R ____ W/E

**Additional Information**

Annual Service Connection Permit? ☐ Yes ☐ No

Utility Work Order #: _____

Fee Required? ☒ Yes ☐ No Amount $ **25.00**

**DESCRIPTION OF PROPOSED WORK (Check and fill out all that apply)**

UTILITY TYPE: ☐ Electric ☐ Gas/petroleum ☐ Communications ☐ Water ☐ Sanitary Sewer ☐ Private Line
☐ Transmission ☐ Distribution ☐ Service *Facility Size/Capacity:*_____
(diameter, # fibers, psi, kV, etc.)

ORIENTATION: ☐ Overhead ☐ Underground ☐ Parallel to Hwy Centerline ☐ Hwy Crossing ☐ Bridge Attachment ☐ Tunnel

WORK TYPE: ☐ New Construction ☐ Improve/repair Existing ☐ Maintenance ☐ Removal ☐ Abandon in Place

CONSTRUCTION METHOD(S): ☐ Plow ☐ Trench ☐ Bore ☐ Suspend on Poles/towers ☐ Open Cut Hwy ☐ Tree Cutting/removal
☐ Cased ☐ Chemical Treatment of Trees/brush *Erosion Control Designation:* ☐ Major ☐ Minor

Provide additional narrative if needed: _____

_____

NAME AND PHONE NUMBER OF UTILITY PERSON RESPONSIBLE FOR CONSTRUCTION:

_____

Estimated Starting Date: _____ Estimated Completion/Restoration Date: _____

The Applicant understands and agrees that the permitted work shall comply with all permit provisions and conditions of the Jackson County Utility Policy in effect at the time of this application, and with any special provisions listed below or attached hereto, and any and all plans, details, or notes attached hereto and made a part thereof.

BY: _____ Title: _____ Date: _____
(Signature of Authorized Representative)

_____ _____
(Typed/Printed Name of Person Signing Above or Electronic Signature Code) (Authorized Applicant/Company Representative Phone Number)

**DO NOT WRITE BELOW THIS LINE**

**PERMIT APPROVAL BY PERMITTING AUTHORITY**

The foregoing application is hereby approved and permit issued by the Permitting Authority subject to full compliance by the Applicant with all provisions and conditions stated in the Jackson County Utility Accommodation Policy including the Indemnification as included in 96.03 of the Jackson County Utility Accommodation Policy in effect on the date of this application.

Supplemental Provisions attached: ☐ YES ☐ NO

BY:_____
(Signature of Authorized Representative)

Title: _____ Date: _____

Revised: 9/8/00

Fee Received: $ _____
Check Number: _____
Dated Issued: _____
Hwy Project #: _____
Permit Number: _____