


PERMIT TO EXCAVATE IN PUBLIC STREET Director of Public Works Record Town of Madison, Wisconsin	PURPOSE OF EXCAVATION: (Fill-in Appropriate Spaces) ___ Install ___ Repair ___ Cut Off ___ Main ___ Service ___ Other TYPE OF FACILITY: _____
Address: _____	

FEE SCHEDULE: (To be determined by Director of Public Works)

Minimum Fee (includes one excavation and up to 100' of trench).....	\$ 70.00
Additional Excavations and/or trenching (\$70 per excavation or 100' of trench).....	_____
New Street Excavation (\$1000 per each).....	_____
Penalty Assessed (if applicable).....	_____
TOTAL	\$ _____

Proposed new utility locations shall be in accordance with Town of Madison Policy for Standardization of Utility Locations. Applicant shall indicate location of street excavation with dimensions to nearest intersection and/or property line <u>on attached sketch</u> . Dimensions to face of curb, edge of road, or sidewalk, if present, are desirable.	<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:50%;">LOCATION</td> <td style="width:50%;">TYPE OF TRENCH</td> </tr> <tr> <td><input type="checkbox"/> Center Lane</td> <td><input type="checkbox"/> Concrete</td> </tr> <tr> <td><input type="checkbox"/> Curb Lane</td> <td><input type="checkbox"/> Black Top</td> </tr> <tr> <td><input type="checkbox"/> Terrace</td> <td><input type="checkbox"/> Sod</td> </tr> <tr> <td><input type="checkbox"/> Sidewalk</td> <td><input type="checkbox"/> Other _____</td> </tr> </table>	LOCATION	TYPE OF TRENCH	<input type="checkbox"/> Center Lane	<input type="checkbox"/> Concrete	<input type="checkbox"/> Curb Lane	<input type="checkbox"/> Black Top	<input type="checkbox"/> Terrace	<input type="checkbox"/> Sod	<input type="checkbox"/> Sidewalk	<input type="checkbox"/> Other _____
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ESTIMATED STARTING DATE: _____	ESTIMATED COMPLETION DATE: _____
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NOTE - APPLICANT SHALL NOTIFY: Town of Madison Public Works Department @ 210-7264 (FAX 210-7236) 48 Hours Prior to Starting Work & Upon Completion of Project	 <p>“CALL 3 WORK DAYS BEFORE YOU DIG” DIGGERS HOTLINE Toll Free 1-800-242-8511</p>
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In consideration of being permitted to make such excavation, I hereby agree that I will faithfully comply with the terms of this permit, including the Special Provisions; that I will comply with all applicable statutes, ordinances, and regulations of the State of Wisconsin, Dane County, and Town of Madison; that contractors shall become qualified by the Town of Madison prior to starting work on this permit; that I will indemnify, defend and hold the Town of Madison harmless from any and all claims, liability, loss, damage or expense incurred by the Town of Madison on account of any injury to or death of any person or any damage to property caused by or resulting from activity or work performed under this permit, whether caused by or contributed to by the Town of Madison, its officials, agents or employees, and that I hereby agree to purchase comprehensive public liability, contractual and property damage insurance, with the Town of Madison as a named additional insured for a period of three (3) years from the date of completion of work hereunder, in an amount not less than \$1,000,000 per claim occurrence from a company or companies authorized to do business in the State of Wisconsin and licensed by the State of Wisconsin Insurance Commissioners, such insurance shall be evidenced by a certificate of insurance showing the Town of Madison as a named additional insured and shall provide thirty (30) days written notice to the Town upon cancellation or material change in the policy with renewal certificates provided to the Town for three (3) years from date of completion of work hereunder; that I will at all times keep the place where such excavation is made properly guarded by day and lighted by night; that I will leave the street, sidewalk, curb and gutter, alley or terrace in as good or better condition than existed when the work was commenced; that I will have all finished concrete and asphalt work within the right-of-way performed by a licensed concrete layer or licensed asphalt paver, as the case may be; that all restoration of the street, sidewalk, alley or terrace affected by my acting upon this permit shall be completed within twenty (20) calendar days of the closing of the excavation; that I will be responsible for future maintenance of pavement patches, sidewalk, and curb and gutter installed under this permit due to heaving, settling, etc. until the Town replaces or resurfaces the pavement, sidewalk or curb and gutter under an improvement project; that I will provide the Town of Madison 72 hours notice prior to commencement of the work if the project requires a detour; that I agree this permit may be voided by the Town Director of Public Works if the work is not started within a reasonable length of time after the above stated starting date; and that I will comply with Title 4 Chapter 2 of the Town of Madison Code of Ordinances, Streets and Sidewalks, and Title 10 Chapter 8, Construction Site Erosion Control.

SPECIAL PROVISIONS: _____ _____ _____	<input type="checkbox"/> WORK ZONE SIGNING AND BARRICADING SHALL BE IN ACCORDANCE WITH THE WISCONSIN MANUAL ON UNIFORM TRAFFIC CONTROL (MUTCD)
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FOR TOWN USE ONLY: APPROVED Department of Public Works BY _____	Town-Qualified Contractor Doing Work: _____ Requested By: _____ Signature _____	Phone No. _____ Phone No. _____
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