

<u>Office Use</u>	TOWN OF BYRON	<u>Office Use</u>
<u>Permit No.</u> _____	TEMPORARY	
	ROAD RIGHT-OF-WAY PERMIT	Fee Paid: _____
<u>Permit Expiration Date:</u> ____/____/____	Fee: \$50.00	Landowners Notified ()

Applicant: _____ **Date:** _____

Current Mailing Address: _____

City, State, Zip: _____

Phone Number: _____ **E-mail:** _____

Subcontract 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 Byron 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 Byron: _____	

Permit to perform work as stated on this application is hereby: Approved () Denied()	
Chair Signature: _____	Date: ____/____/____
Permit Issued by: Clerk Signature _____	Date: ____/____/____

