TOWN OF WASHINGTON 2301 Town Hall Rd, Eagle River WI 54521 715-479-8886

APPLICATION FOR PERMIT TO CUT TIMBER OR PERFORM WORK ON THE TOWN ROAD RIGHT-OF-WAY

Applicant:	Property Owner:		I	Oate:	
	Current Mailing Address:_				
	City, State, Zip:				
	Phone Number:	Email:			
Location (d	quarter/section/township/ra	nge, etc. Please attach copy	y showin	g location)
Tax Parcel	No				
Description Materials:	n of Timber Cutting / Work	in Detail / Type of Installa	ation / Te	emporary	Storage of
Project Du	ration: Start Date:	Completion	n Date:		
WORKING	ant shall contact the Town G DAYS prior to the start of ed on Town right of way, pri	f the proposed work. No ti	mber cut	tting or ot	her work shall be
	is not completed by the "Cor completed unless reauthoriz it.				
prescribed by satisfaction condition, a	y agree that the work shall by the Town pursuant to Wis. In the case of temporary al and that I/We shall be liable to s of said work or as a result the	Stat. § 86.16 and shall be peterations/excavation, the Town the Town, as the case may be	rformed a	and compl shall be res	eted to the Town's tored to its former
_					/
	ation received by Town of W				
Permit to pe	erform work as stated on this	application is hereby approv	ved □	denied []
Chair Signa	iture:		Date	/	/
Permit issue	ed by: Clerk Signature		Date	/	/
Permit Nun	nber	Т	HIS PE	RMIT IS	REVOCABLE