

Crandall, Jay

From: chad viner <vinerchad@yahoo.com>
Sent: Friday, May 28, 2021 10:23 AM
To: Crandall, Jay
Subject: Approval of permit

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Hello,

Would like approval of excavation permit for 1019 Clinton St. sewer relay.

Situation is no sanitary sewer main in Clinton street at property line, so tapping of main sewer in Kane street is only route. Due to Kane street recently paved in 2017, owner of property never received a letter stating they should inspect lateral. With no record of this lateral at Kane street. Was located with our sewer camera down boulevard on Clinton street, and in to sanitary in Kane. Now it has an issue every 2 months and needs to be replaced. So excavation of black top in Kane street is needed for new tap onto city sanitary.

Please let me know if this will be approved.

Thank You,

Chad Viner
608.790.5458
C. Viner Plumbing & Excavating LLC

Contractor
Request



EXCAVATION WITHIN RIGHT-OF-WAY PERMIT

Engineering Dept. • Phone: (608) 789-7505 • Fax: (608) 789-7367
http://www.cityoflacrosse.org engineering@cityoflacrosse.org

Permit No.:

Date:

STATUS:

Munis #:

CONTRACTOR	Name: C VINER PLBG		
	Address: S1719 HUGHES RD		
	City: WESTBY	State: WI	Zip Code: 54667
	Phone:	Cell: 608.790.5458	Fax: Email:

PROJECT	Location of Excavation: 1019 CLINTON ST & KANE STREET	
	<input checked="" type="checkbox"/> Open Cut (Circle One) Boring <input checked="" type="checkbox"/>	
	Area to be excavated (check all that apply): <input checked="" type="checkbox"/> Street <input checked="" type="checkbox"/> Blvd. <input type="checkbox"/> Curb/Gutter <input checked="" type="checkbox"/> Sidewalk <input type="checkbox"/> Alley <input type="checkbox"/> Other	
	Number of Traffic Lanes that will Close: 1	Number of Parking Lanes that will Close: 1
	Purpose of excavation (Check all that apply): <input type="checkbox"/> Water <input checked="" type="checkbox"/> San. Sewer <input type="checkbox"/> Storm Water <input type="checkbox"/> Gas <input type="checkbox"/> Electrical <input type="checkbox"/> Communication <input type="checkbox"/> Other:	
Estimated Start Date: 6.1.2021	Completion Date: 6.3.2021	

Note #1: The undersigned understands and agrees to the following: 1) The permitted work shall comply with all permit provisions and conditions listed on and attached to this form; 2) That insurance requirements shall be met prior to approval either by submitting information with application or by keeping current information on file with the Engineering Department.; 3) The applicant shall contact City Dispatch and the City Traffic Engineer 24 hours prior to the closure of any traffic lanes and shall provide an estimate of the duration of closure. Temporary traffic control shall be provided and maintained by the applicant and shall comply with Part 6 of the Manual on Uniform Traffic Control Devices (MUTCD).

Note #2: Once invoiced, application fees may not be refunded.

CHAD VINER	OWNER	5.28.2021
(PRINT) AUTHORIZED REPRESENTATIVE	TITLE	DATE
(SIGN) AUTHORIZED REPRESENTATIVE		

Office Use Only	Customer #:	Invoice #:
	Permit Issued By:	
	Permit Conditions:	