



**REVOCABLE OCCUPANCY / STREET PRIVILEGE PERMIT APPLICATION
FOR COMMUNICATIONS (FIBER OPTICS, TELEPHONE, CABLE, ETC.)**

City of La Crosse Engineering Department

Phone: 608-789-7505 Email: engineering@cityoflacrosse.org <http://cityoflacrosse.org>

Encroachment Owner: Perry McClellan - Charter Communications 1485163
 Address: 1701 W Ave S City: La Crosse State: WI Zip: 54650
 Phone # 608-317-6213 Email Address perry.mcclellan@charter.com
 Application Preparer (if different from above) Matt Hilscher
 Relationship with Owner: Contractor
 Phone # 920-924-3690 ex 3528 Email Address mhilsche@mi-tech.us

Description of Proposed Encroachment:

Install new coax in right of way

Encroachment Addresses (List by Street and 100 blocks):

1303 Hyde Ave

I certify that I have reviewed the Municipal Code and understand all that is related to this permit request. I further certify that I have the full authority to make the foregoing application; the information in the application and the required submittals are complete and correct; the Work or Use performed shall comply with all the laws of the State of Wisconsin, and all ordinances, rules, regulations, policies and special conditions of the City of La Crosse. The applicant agrees to perform the work covered by an approved permit with diligence and convenience to the public. **See Sheet 2 of 2 for Additional Conditions.**

Signature of Owner or designee: Perry McClellan Date: 7/18/2019
 Print Name and Title: Perry McClellan Construction Coordinator

Please return this completed application along with required information and fees noted on checklist below to: City of La Crosse, Engineering Department, 400 La Crosse Street, La Crosse, WI 54601. You will then be given notice of when your request will be on the Board of Public Works agenda for consideration. **Average completion time for validation 45 days.**

 BELOW THIS LINE TO BE COMPLETED BY CITY STAFF ONLY

Required items to be provided by Applicant:

- Scale Drawing of encroachments
(Complete Utility Locate by Digger's Hotline Required)
- Certificate of Insurance (City as additional Insured)
- Initial Application Fee \$ _____
- City Utility Potential Conflict Notification and Sign-Off

Board of Public Works

Approval Date:

Encroachment Type:

Permit Number:

All Fees are Non-Refundable & Subject to change by City Council

SHEET 1 OF 2