TEMPORARY STREET PRIVILEGE PERMIT

Engineering Dept. = Phone: (608) 789-7505 = Fax: (608) 789-8184 http://www.cityoflacrosse.org

		~	 -
Date			

Permit No:

CO	STATUS:	Permit Type:	Parcel ID:	
	Name: A Crosse City Vision Address: 500 moun street City: I a Crosse State: 1 Phone: (a08.184.044) Cell: Vehicle License Number (If Applicable): MA	Fax: Tag #:	ership with DM ty of Lacrosse 34001	
	Purpose for permit: Shouffale De Additional Conditions en Shouffales +	ing Lane(s) Boutevard Sidewalk econocitions and wine to be installed on k provided. Annual [End Date: March	Alley	
	Invoice #: Fee: \$ (\$35.00 first 5 days) Permit issued by:	, \$2.00 each additional day) N/A	Jacob Circuit	
	comments: 54 - Snowflakes me Handware inch be metalled a year around	wardfer each sr on light pole and	owflaketo	
	200 - from top a	snops into bracke own Wreath ha nnual Locations ophased approx	ngs from arm	
	2019 - 34 : of the Hist Esce attach 2019 - 200 (wreaths (Zon	District Made myellow Mouflakes Hureat each side Zonead	LSICE
cond subn shall estin comp Note	undersigned understands and agrees to the following: itions listed on and attached to this form; 2) That in hitting information with application or by keeping cur contact City Dispatch and the City Traffic Engineer 2 nate of the duration of the closure. Temporary traffic by with Part 6 of the <i>Manual on Uniform Traffic Contection</i> : Once invoiced, application fees may not be refunded of the Engineering Department.	 The permitted work shall comply with a nsurance requirements shall be met prior rent information on file with the Engineeri 4 hours prior to the closure of any traffic la control shall be provided and maintained b trol Devices (MUTCD). 	to approval either by ing Dept.; 3) The applicant ines and shall provide an by the applicant and shall	44
(PRII	NT) AUTHORIZED REPRESENTATIVE	TILE	DATE	
(SIGI	N) AUTHORIZED REPRESENTATIVE	πιε	DATE	