

On State Highway?
 Yes No

REVOCABLE OCCUPANCY/ STREET PRIVILEGE PERMIT APPLICATION

City of La Crosse Legal Department - Phone: (608)789-7511
<http://www.cityoflacrosse.org>

Permit Number:
#

APPLICANT

Name: Dax Connelly Company Name: Fairway Outdoor Advertising, LLC
 Address: 1329 Interchange Pl City: La Crosse State: WI Zip: 54603
 Phone #: (608) 784-8200 Cell #: () Fax #: (608) 782-1944
 Email: dax.connelly@fairwayoutdoor.com

PROPERTY OWNER *If different from applicant

Name: City of La Crosse Company Name: City of La Crosse
 Address: 400 La Crosse St. City: La Crosse State: WI Zip: 54601
 Phone #: (608) 789-7511 Cell #: () Fax #: ()
 Email: _____

ENCROACHMENT TYPE (Check one):

- | | |
|--|--|
| <input type="checkbox"/> AWNING/ON-PREMISE SIGN/OVERHEAD HEATER/CANOPY | <input type="checkbox"/> OUTDOOR DINING AREA |
| <input type="checkbox"/> FIRE ESCAPE/ RESCUE PLATFORM/BALCONY | <input type="checkbox"/> AESTHETIC APPURTENANCE |
| <input type="checkbox"/> VENDING MACHINE/NEWSBOX | <input type="checkbox"/> GROUNDWATER MONITORING WELL |
| <input type="checkbox"/> UNDERGROUND WIRES AND INFRASTRUCTURES | <input type="checkbox"/> BOATHOUSE/HOUSEBOAT |
| <input type="checkbox"/> AUTOMATIC IRRIGATION SYSTEM/SIDEWALK ENCROACHMENT | <input checked="" type="checkbox"/> OFF-PREMISE SIGN |
| <input type="checkbox"/> OTHER: _____ | |

DESCRIPTION OF ENCROACHMENT/WORK TO BE PERFORMED:

Structure # W16167 - US 53 (97 Copeland Ave.) 590' S/O Monitor St. ES - Lots 6, 7, 8, 9 & 10 in Block 17 of the original plat of Town of La Crosse, in the City of La Crosse, La Crosse County, WI. Sign is double sided, double high outdoor advertising sign adjacent to the premises at 97 Copeland Ave. on the right of way.

Desired Start Date: _____

Est. Completion Date: _____

CONTRACTOR/SIGN CO.: Fairway Outdoor Advertising, LLC **PERSON IN CHARGE:** Dax Connelly
Phone #: (608) 433-2294 **Cell #:** (608) 769-9678 **Fax #:** (608) 782-1944

For timely review, City Ordinance requires that applications be submitted at least 45 days prior to the need for any encroachment. Notwithstanding approval of the application, a permit is not valid until it is signed, recorded and compliance with all other permit conditions is verified. All necessary permits from other City Departments must also be obtained before the encroachment can be installed/erected.

I authorize the applicant listed above to apply for a Street Privilege Permit through the City of La Crosse.

STATE OF WISCONSIN)

COUNTY OF LA CROSSE)

Personally came before me this ____ day of _____, 20____, the above named

_____ to me known to be the person(s) who executed the foregoing instrument and acknowledged the same.

Property Owner Signature: _____

A signed letter from the property owner or management company may be used in lieu of this signature **
 Signature of Property Owner **must** be notarized **

Tax Parcel ID #:

Notary Public, _____ County, _____
 My commission expires: _____

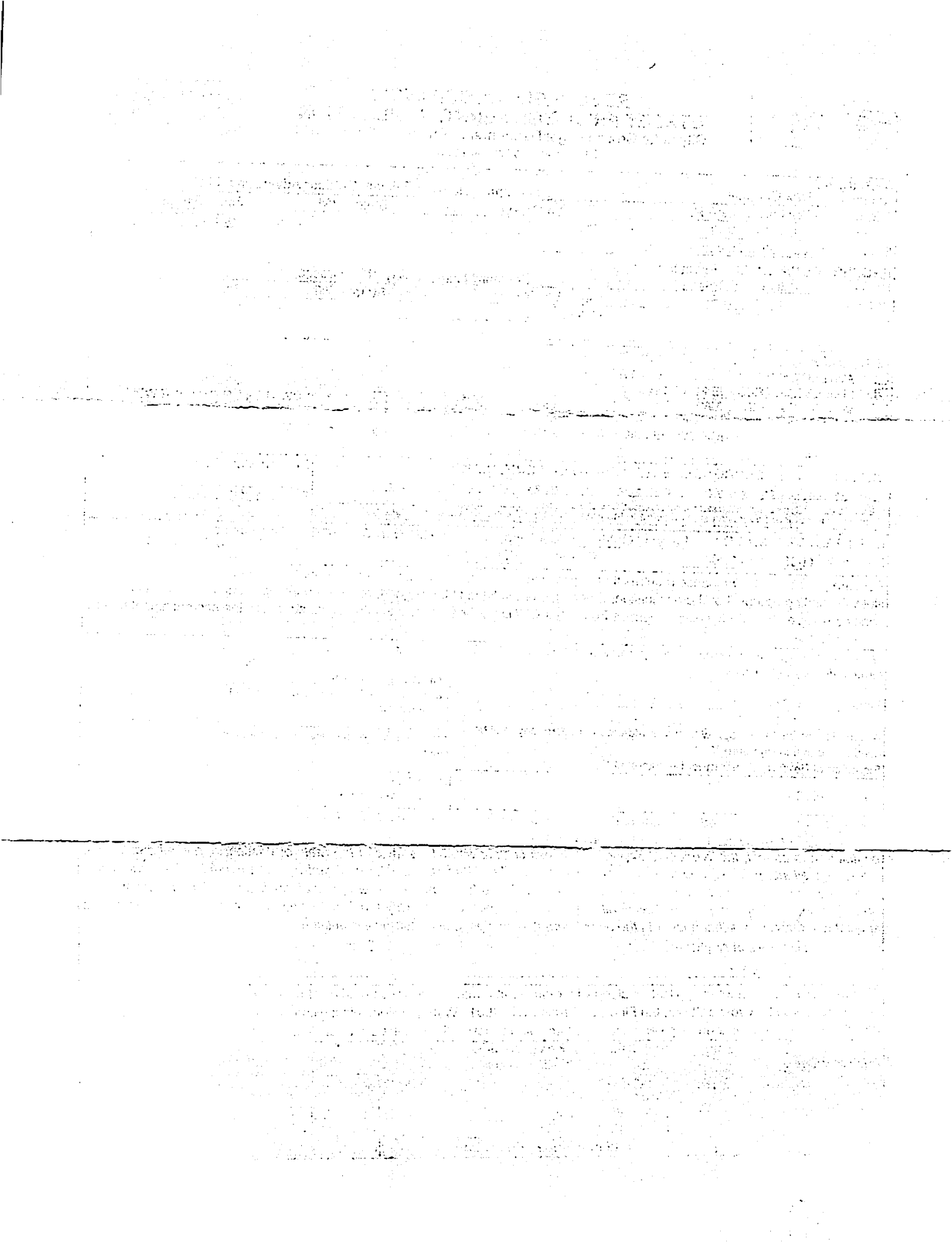
I certify that I have reviewed the Municipal Code and understand all that is related to this permit request. I further certify that I have the full authority to make the foregoing application; the information in the application and the required submittals are complete and correct; the Work or Use performed 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 or use covered by an approved permit with diligence and convenience to the public. After approval, applicant shall be responsible for obtaining any final documents and follow all procedures as defined in the City Municipal Code. Approval of this application is subject to the conditions that appear in the actual permit to be signed after approval is obtained.

Signature of Applicant: Dax Connelly

Date: 1-12-17

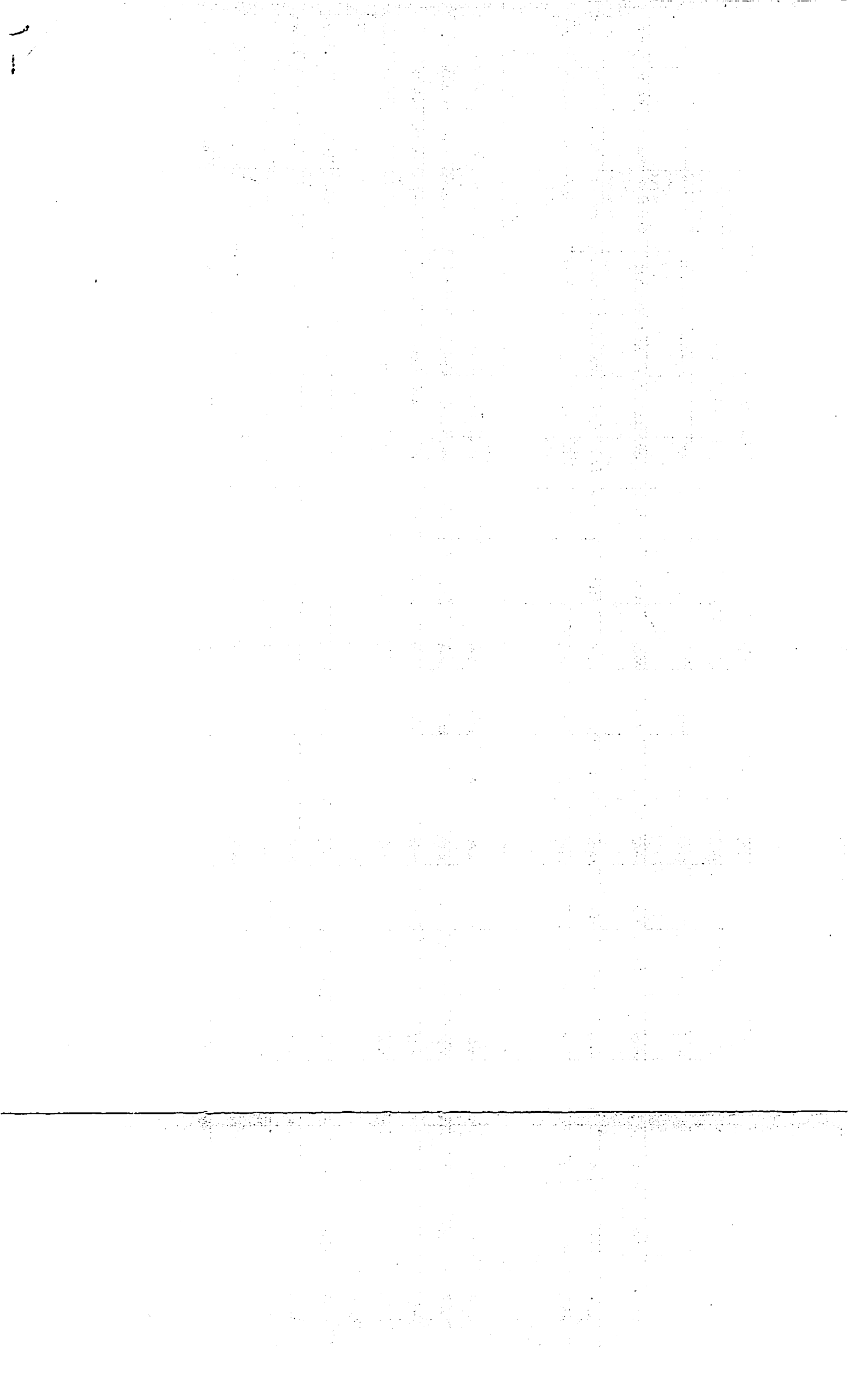
Please return this completed application along with required information and fees noted on checklist to: City of La Crosse, Legal Department, 400 La Crosse Street, 6th Floor, La Crosse WI 54601. With questions please contact the Legal Department at (608)789-7511. You will then be given notice of when your request will be on the Board of Public Works agenda.

Approved By: _____ Approval Date: _____	Required items to be provided by Applicant	Gray Shaded Areas to be Completed by City Staff
	Scale drawing of encroachment <input type="checkbox"/> Legal Description <input type="checkbox"/> Certificate of Insurance <input type="checkbox"/> Initial Application Fee \$ _____ <input type="checkbox"/> Annual Permit Fee \$ _____ <input type="checkbox"/>	<input type="checkbox"/> Special Conditions of Approval Attached
All items due prior to approval		NON-REFUNDABLE ANNUAL PERMIT FEE \$ _____ Payable to City Treasurer (See fee schedule)
		Check # _____ Date Received: _____



CITY OF LA CROSSE - PERCENTAGE REPORT 1-1-16 TO 12-31-16

Lease	Number (Face)	Number (Contract)	Advertiser	From	To	Taken Down On	Subcontract Type	Media Type	Gross Revenue (1/1/2016 - 1/31/2016)	Gross Revenue (2/1/2016 - 2/29/2016)	Gross Revenue (3/1/2016 - 3/31/2016)	Gross Revenue (4/1/2016 - 4/30/2016)	Gross Revenue (5/1/2016 - 5/31/2016)	Gross Revenue (6/1/2016 - 6/30/2016)	Gross Revenue (7/1/2016 - 7/31/2016)	Gross Revenue (8/1/2016 - 8/31/2016)	Gross Revenue (9/1/2016 - 9/30/2016)	Gross Revenue (10/1/2016 - 10/31/2016)	Gross Revenue (11/1/2016 - 11/30/2016)	Gross Revenue (12/1/2016 - 12/31/2016)	TOTAL FOR 12 PERIODS	
LW16167	6167st	WI17901	AD COUNCIL	12/12/2014	12/13/2014	1/22/2016	Public Service	Custom Bulletin	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
LW16167	6167st	WI19299	FAIRWAY OUTDOOR ADVERTISING	1/25/2016	1/26/2016	5/5/2016	Public Service	Custom Bulletin	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
LW16167	6167st	20160171	Anheuser-Busch	5/2/2016	6/26/2016		Sold	Bulletin	\$0.00	\$0.00	\$0.00	\$0.00	\$1,017.86	\$882.14	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$1,900.00
LW16167	6167nb	WI0019385	Wells Fargo Advisors	12/7/2015	1/3/2016	1/4/2016	Bonus	Poster	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
LW16167	6167nb	WI19292	AD COUNCIL	1/4/2016	1/4/2016	4/4/2016	Public Service	Poster	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
LW16167	6167nb	JS-Viterbo	Viterbo University	4/4/2016	4/10/2016		Sold	Poster	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
LW16167	6167nb	20160007	University	4/4/2016	4/10/2016	4/13/2016	Sold	Poster	\$0.00	\$0.00	\$0.00	\$200.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$200.00
LW16167	6167nb	WI19292	AD COUNCIL	4/13/2016	4/13/2016	5/2/2016	Public Service	Poster	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
LW16167	6167nb	20160056	Local Lupus Alliance	5/2/2016	5/29/2016	6/14/2016	Sold	Poster	\$0.00	\$0.00	\$0.00	\$0.00	\$825.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$825.00
LW16167	6167nb	WI19292	AD COUNCIL	6/13/2016	6/13/2016	7/6/2016	Public Service	Poster	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
LW16167	6167nb	20160185	Health System	7/4/2016	7/31/2016	8/4/2016	Sold	Poster	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$750.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$750.00
LW16167	6167nb	WI19292	AD COUNCIL	8/1/2016	8/1/2016	10/31/2016	Public Service	Poster	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
LW16167	6167nb	20160506	NORTH LA CROSSE BUSINESS ASSOC.	10/31/2016	11/27/2016	12/2/2016	Public Service	Poster	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
LW16167	6167nb	WI19292	AD COUNCIL	11/28/2016	11/28/2016	12/5/2016	Public Service	Poster	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
LW16167	6167nb	20160614	AD COUNCIL	12/5/2016	12/29/2016	12/27/2016	Sold	Poster	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$771.43
LW16167	6167nb	20160614	Broadcasting	12/30/2016	2/12/2017		Sold	Poster	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
LW16167	6167nt	WI0018548	Kwik Trip - La Crosse	3/14/2016	3/27/2016	3/28/2016	Sold	Poster	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
LW16167	6167nt	WI0019588	Kwik Trip - La Crosse	3/28/2016	4/24/2016	4/25/2016	Sold	Poster	\$0.00	\$0.00	\$90.00	\$540.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$630.00



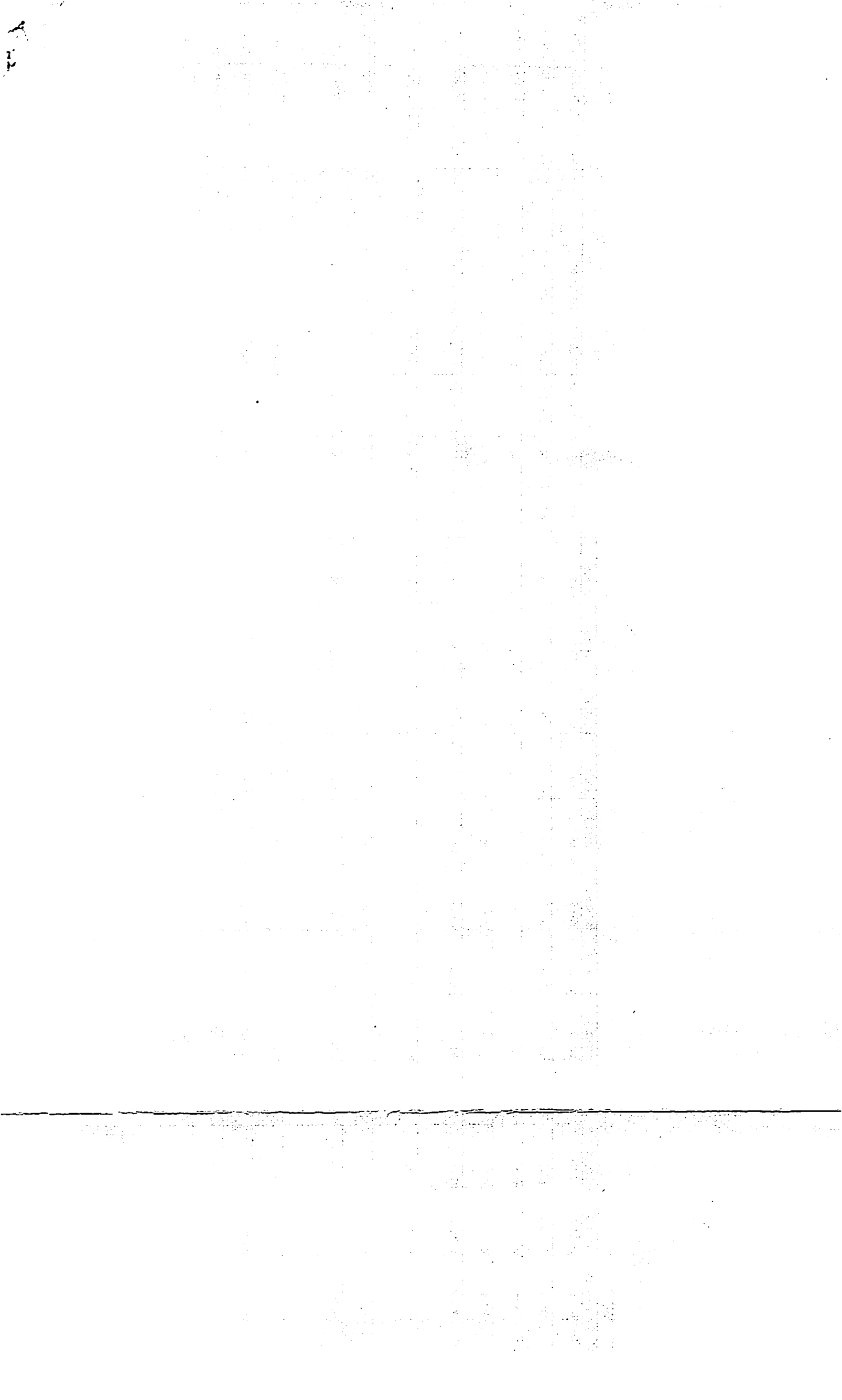
CITY OF LA CROSSE - PERCENTAGE REPORT 1-1-16 TO 12-31-16

Lease	Number (Face)	Number (Contract)	Advertiser	From	To	Taken Down On	Subcontract Type	Media Type	Gross Revenue (1/1/2016 - 1/31/2016)	Gross Revenue (2/1/2016 - 2/29/2016)	Gross Revenue (3/1/2016 - 3/31/2016)	Gross Revenue (4/1/2016 - 4/30/2016)	Gross Revenue (5/1/2016 - 5/31/2016)	Gross Revenue (6/1/2016 - 6/30/2016)	Gross Revenue (7/1/2016 - 7/31/2016)	Gross Revenue (8/1/2016 - 8/31/2016)	Gross Revenue (9/1/2016 - 9/30/2016)	Gross Revenue (10/1/2016 - 10/31/2016)	Gross Revenue (11/1/2016 - 11/30/2016)	Gross Revenue (12/1/2016 - 12/31/2016)	TOTAL FOR 12 PERIODS	
LW16167	6167nt	W10019588	Kwik Trip - La Crosse	4/25/2016	6/5/2016	6/6/2016	Sold	Poster	\$0.00	\$0.00	\$0.00	\$180.00	\$930.00	\$150.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$1,260.00
LW16167	6167nt	W10019588	Kwik Trip - La Crosse	6/6/2016	7/14/2016	7/11/2016	Sold	Poster	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$403.85	\$226.15	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$630.00
LW16167	6167nt	W10019588	Kwik Trip - La Crosse	7/15/2016	8/25/2016	8/23/2016	Sold	Poster	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$255.00	\$375.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$630.00
LW16167	6167nt	W10019588	Kwik Trip - La Crosse	8/26/2016	10/6/2016	10/3/2016	Sold	Poster	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$90.00	\$450.00	\$90.00	\$0.00	\$0.00	\$0.00	\$630.00
LW16167	6167nt	W10019588	Kwik Trip - La Crosse	12/30/2016	2/2/2017		Sold	Poster	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$36.00	\$36.00
LW16167	6167sb	W10019323	NORTH LA CROSSE BUSINESS ASSOC.	11/2/2015	11/29/2015	7/5/2016	Bonus	Poster	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
LW16167	6167sb	20160194	MAJESTIC PINES CASINO	7/4/2016	7/31/2016	8/4/2016	Sold	Poster	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$626.48	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$626.48
LW16167	6167sb	W119300	DISABLED AMERICAN VETERANS DAIRYLAND POWER	8/1/2016	8/1/2016	12/6/2016	Service	Poster	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
LW16167	6167sb	20160577	COOPERATIVES	12/5/2016	12/18/2016	12/21/2016	Sold	Poster	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$400.00
LW16167	6167sb	W119292	AD COUNCIL	12/19/2016	12/19/2016		Public Service	Poster	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
LW16167	6167nt	W10018548	Kwik Trip - La Crosse	3/30/2015	3/13/2016	3/15/2016	Sold	Poster	\$597.86	\$559.29	\$520.71	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$1,677.86
LW16167	6167nt	W10019588	Kwik Trip - La Crosse	11/18/2016	12/29/2016	12/27/2016	Sold	Poster	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$1,260.00
LW16167	6167nt	W10019588	Kwik Trip - La Crosse	10/7/2016	11/17/2016	11/14/2016	Sold	Poster	\$597.86	\$559.29	\$610.71	\$920.00	\$2,772.86	\$1,435.99	\$0.00	\$1,857.63	\$465.00	\$450.00	\$750.00	\$840.00	\$900.00	\$1,260.00

5% \$674.34

2016 base pmt. amt.	3600
Base pmt. paid 9-1-16	-3365.92
amt. owe for 2016 pmt.	\$234.08
2017 base pmt. amt.	3600
amt. paid 1-1-17	-3420.1
amt. owed for 2017	179.9

TOTAL AMT. DUE \$413.98



UNITED FIRE GROUP

Bond Transaction Report

BOND NO 55203521

AGENT 481852

**FLEIS INSURANCE AGENCY INC
1824 E MAIN ST
ONALASKA, WI 54850-0537**

PRINCIPAL ACCOUNT 0600033095

OBLIGEE

**FAIRWAY OUTDOOR ADVERTISING LLC
325 N 3RD STREET
LA CROSSE, WI 54601**

**CITY OF LA CROSSE
400 LACROSSE STREET
LA CROSSE, WI 54601**

BOND TYPE

BOND TERM

RENEWAL METHOD

LICENSE & PERMIT

12/7/2016 - 12/7/2017

CONTINUATION CERTIFICATE

BOND DESCRIPTION

ERECT SIGNS IN THE CITY OF LA CROSSE, WI

TRANSACTION REASON

BILLING METHOD

RENEWAL

AGENCY BILL

TRANSACTION INFORMATION

BOND AMOUNT

PREMIUM

COMMISSION

10000.00

100.00

.300

**COPY**

United Fire & Casualty Company
United Life Insurance Company
Addison Insurance Company
Lafayette Insurance Company
United Fire & Indemnity Company
United Fire Loyds
Financial Pacific Insurance Company

CONTINUATION CERTIFICATE

BOND NO.: 55203521

PRINCIPAL: FAIRWAY OUTDOOR ADVERTISING, LLC 325 N 3RD STREET LA CROSSE, WI 54601

OBLIGEE: CITY OF LA CROSSE 400 LACROSSE STREET LA CROSSE, WI 54601

TYPE OF BOND: ERECT SIGNS IN THE CITY OF LA CROSSE, WI

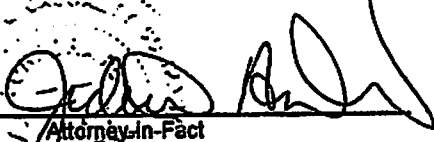
BOND PENALTY: 10,000.00

BOND TERM: From 12/07/2016 To 12/07/2017

The Company indicated hereby continues in force, for the period described, the Bond designated above, subject to all the agreements, limitations, and conditions thereof and provides that the liability under said bond and all continuations thereof shall not be cumulative and shall not in any event exceed the amount of said Bond herein before set forth.

Signed, Sealed and Dated 09/08/2016.

UNITED FIRE & CASUALTY COMPANY

By 
Attorney-in-Fact

LICP0003 04 11

HOME OFFICE: 118 Second Avenue SE, PO Box 73909, Cedar Rapids, Iowa 52407-3909 Phone: 319-399-5700 or 800-343-9130 FAX: 888-726-9738

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

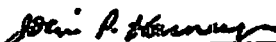
PRODUCER Alliant/Maslrow Insurance Services Mackey Team 353 N. Clark Street Chicago, IL 60654-4704	CONTACT NAME: Michelle Forte PHONE (A/C No. Ext): 312 595-7165 FAX (A/C No.): 312 595-7163 EMAIL ADDRESS: michelle.forte@alliant.com													
	<table border="1"> <thead> <tr> <th>INSURER(S) AFFORDING COVERAGE</th> <th>NAIC #</th> </tr> </thead> <tbody> <tr> <td>INSURER A: Phoenix Insurance Company</td> <td>26623</td> </tr> <tr> <td>INSURER B: Travelers Property Casualty Co.</td> <td>25674</td> </tr> <tr> <td>INSURER C: Travelers Indemnity Company</td> <td>25658</td> </tr> <tr> <td>INSURER D:</td> <td></td> </tr> <tr> <td>INSURER E:</td> <td></td> </tr> <tr> <td>INSURER F:</td> <td></td> </tr> </tbody> </table>	INSURER(S) AFFORDING COVERAGE	NAIC #	INSURER A: Phoenix Insurance Company	26623	INSURER B: Travelers Property Casualty Co.	25674	INSURER C: Travelers Indemnity Company	25658	INSURER D:		INSURER E:		INSURER F:
INSURER(S) AFFORDING COVERAGE	NAIC #													
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INSURER D:														
INSURER E:														
INSURER F:														
INSURED Fairway Media Group LLC 500 Colonial Center Parkway Suite 120 Roswell, GA 30076-8852														

COVERAGES CERTIFICATE NUMBER: REVISION NUMBER:

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

CLASS	TYPE OF INSURANCE	APPL. SUBR. (Y/N)	POLICY NUMBER	POLICY EFF. (MM/DD/YYYY)	POLICY EXP. (MM/DD/YYYY)	LIMITS
A	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER:		PSLS4G365807PHX16	11/01/2016	11/01/2017	EACH OCCURRENCE \$1,000,000 DAMAGE TO RENTED PREMISES (Per occurrence) \$100,000 MED EXP (Any one person) \$5,000 PERSONAL & ADV INJURY \$1,000,000 GENERAL AGGREGATE \$2,000,000 PRODUCTS - COLL/OP AGG \$2,000,000 \$
C	<input checked="" type="checkbox"/> AUTOMOBILE LIABILITY <input checked="" type="checkbox"/> ANY AUTO ALL OWNED AUTOS <input checked="" type="checkbox"/> HIRED AUTOS <input type="checkbox"/> SCHEDULED AUTOS NON-OWNED AUTOS		P8104G365907IND16 Physical Damage \$1,000 Comp Ded \$1,000 Coll Ded	11/01/2016	11/01/2017	COMBINED SINGLE LIMIT (Per accident) \$1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$
	<input type="checkbox"/> UMBRELLA LIAB <input type="checkbox"/> OCCUR <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DEF <input type="checkbox"/> RETENTION \$					EACH OCCURRENCE \$ AGGREGATE \$ \$
A	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY		TC2NUB9D89992516	11/01/2016	11/01/2017	<input checked="" type="checkbox"/> PER STATUTE <input type="checkbox"/> OTHER EL EACH ACCIDENT \$1,000,000
B	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	Y/N N	TRJUB1117L70816	11/01/2016	11/01/2017	EL DISEASE - EA EMPLOYEE \$1,000,000 EL DISEASE - POLICY LIMIT \$1,000,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)
 Broad Named Insured includes Fairway Outdoor Advertising, LLC, 325 N 3rd Street, La Crosse, WI 54601.
RE: Street privilege permit application for 97 Copeland Avenue - Lease for 604 Second Street South (for existing sign structure).
Reference (Name of Location requesting): Fairway Outdoor-La Crosse, Wisconsin.
Project: Street Privilege Permit-Sign Structure Lease.
 (See Attached Descriptions)

CERTIFICATE HOLDER The City of La Crosse - Legal Department Attn: Stephen Matty-City Attorney 400 Lacrosse Street La Crosse, WI 54601	CANCELLATION SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS. AUTHORIZED REPRESENTATIVE 
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DESCRIPTIONS (Continued from Page 1)

Dates: 01/01/2016 - 12/31/2016.

The City of La Crosse is additionally insured on the General Liability Insurance coverage as required by written contract, agreement or permit.