

**WCHA UTILITY ACCOMMODATION POLICY**

**Policy 96.90**

<b>Effective:</b> August 21, 2012	96.00 Utility Accommodation 96.90 Appendices Section 96.99 Fees
<b>Supersedes:</b> January 1, 2000	
By: County Highway Commissioner	
Page 1 of 2	

**Fee Schedule**

Type of Work	Fee
Standard Utility Installation and/or maintenance <sup>1 3</sup>	\$75 Plus administration fees
Utility work requiring open cut of Highway pavement <sup>2</sup>	See figure below, based on most recent Pavement Rating
Utility work requiring open cut of multi-use trail pavement <sup>2</sup>	\$500 for pavement installed in past two years \$250 for pavement installed more than two years ago

Notes:

1. \$75 plus administration fee's, will be invoiced and are non-refundable
2. Not all open cut applications will be approved, particularly if alternate construction is feasible.
3. Open cut fee may be charged if unplanned open cuts are required during construction.

Current Pavement Rating	General Description of Pavement	Open Cut Permit Fee	Additional Comments and Requirements
10 9 8	New or Nearly New Pavement.	\$1,000	The Marathon County Highway Department <b>discourages open cut utility accommodation on new or nearly new roadways.</b> Additional repairs, above and beyond standard open cut repair requirements, may be requested by the Highway Department to adequately accommodate open cut repairs that are allowed on new or nearly new roadways. These measures will be determined on a case-by-case basis by the Highway Department.
7 6	Generally Good Condition.	\$500	Additional repairs, above and beyond standard open cut repair requirements, may be requested by the Highway Department to adequately accommodate open cut repairs that are allowed on roadways in good condition. These measures will be determined on a case-by-case basis by the Highway Department.
5 4 3	In Need of Repair.	\$250	The standard utility accommodation permit fee applies.
2 1	Poor or Very Poor.	\$250	The standard utility accommodation permit fee applies. Utility company or contractor should check with the Highway Department as a roadway rated as 1 or 2 may be programmed for reconstruction. If possible, the utility work should be coordinated with planned roadway improvements.



**Marathon County Highway Department**  
**Application/Permit to CONSTRUCT,**  
**OPERATE, & MAINTAIN UTILITIES WITHIN**  
**HIGHWAY RIGHT-OF-WAY**

Applicant/Company: \_\_\_\_\_  
 Address Line 1: \_\_\_\_\_  
 Address Line 2: \_\_\_\_\_  
 Phone: \_\_\_\_\_  
 Email: \_\_\_\_\_  
 Plans Prepared By: \_\_\_\_\_  
 Preparer's Phone: \_\_\_\_\_  
 Preparer's Email: \_\_\_\_\_

Location Information
Highway(s): _____
Town/Village/City of: _____
_____ ¼ of the _____ ¼ Sec _____
T _____ N _____ R _____ E _____
Annual Service Connection Permit? <input type="checkbox"/> Yes <input type="checkbox"/> No
Utility Work Order # _____

**\*\*NOTICE- COMPLETION CERTIFICATE NEEDS TO BE SENT WITHIN 2 WEEKS OF PROJECT COMPLETION\*\***

Utility Type		Orientation	Work Type	Construction Method(s)	
<input type="checkbox"/> Transmission	<input type="checkbox"/> Private Line	<input type="checkbox"/> Overhead	<input type="checkbox"/> New Construction	<input type="checkbox"/> Plow	<input type="checkbox"/> Suspend on poles/towers
<input type="checkbox"/> Gas/Petroleum	<input type="checkbox"/> Electric	<input type="checkbox"/> Underground	<input type="checkbox"/> Improve/Repair Existing	<input type="checkbox"/> Trench	<input type="checkbox"/> Tree Cutting/Removal
<input type="checkbox"/> Communications	<input type="checkbox"/> Distribution	<input type="checkbox"/> Parallel to hwy centerline	<input type="checkbox"/> Maintenance	<input type="checkbox"/> Bore	<input type="checkbox"/> Chemical treatment of tree/brush
<input type="checkbox"/> Sanitary Sewer	<input type="checkbox"/> Service	<input type="checkbox"/> Hwy Crossing	<input type="checkbox"/> Removal	<input type="checkbox"/> Cased	<input type="checkbox"/> Open cut hwy
	<input type="checkbox"/> Water	<input type="checkbox"/> Bridge attachment	<input type="checkbox"/> Abandon in place	Erosion Control Designation	<input type="checkbox"/> Major
		<input type="checkbox"/> Tunnel			<input type="checkbox"/> Minor

Work Zone Description	Traffic Control Methods	Hours of Operation (Check all that apply)
<input type="checkbox"/> Not Applicable <input type="checkbox"/> Lane encroachment (2 ft or less) <input type="checkbox"/> Full road closure: detour <input type="checkbox"/> Intersection/roundabout <input type="checkbox"/> Full road closure: temporary <input type="checkbox"/> Shoulder/parking lane closure <input type="checkbox"/> Lane closure: without flagging <input type="checkbox"/> Railroad crossing <input type="checkbox"/> Lane closure: with flagging	<input type="checkbox"/> Single flagger operation <input type="checkbox"/> Two flagger operation <input type="checkbox"/> Pilot car operation <input type="checkbox"/> Temporary traffic signals <input type="checkbox"/> Temporary portable rumble strips <input type="checkbox"/> Shoulder work	<input type="checkbox"/> Weekdays <input type="checkbox"/> Weekends <input type="checkbox"/> Daytime <input type="checkbox"/> Nighttime

Utility Person Responsible for Construction: _____ Phone: _____	Utility/Project 24/7 Emergency Contact: _____ Phone: _____	Company name and address of contractor performing work (if not employed by applicant) _____ _____ _____
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The applicant understands and agrees that the permitted work shall comply with all permit provisions and conditions of the Utility Accommodation Policy of Marathon County in effect at the time of the application, and with any special provisions listed below or attached hereto, and any and all plans, details, or notes attached hereto and made a part thereof. By filling in the information below and submitting this application, the applicant is hereby requesting a utility permit from the Marathon County Highway Department and is certifying they are an authorized representative of their company for requesting this permit.

Estimated Start: \_\_\_\_\_ Estimated Completion: \_\_\_\_\_

By: \_\_\_\_\_ (Name of Authorized Representative requesting permit)    \_\_\_\_\_ (Title)    \_\_\_\_\_ (Date)  
 \_\_\_\_\_ (Email)    \_\_\_\_\_ (Telephone Number)

**\*\*Fees associated with this permit will be invoiced by Marathon County Highway Department**  
 Email to send invoice to: \_\_\_\_\_

**Office Use Only**		
<b>Permit Approval by Permitting Authority</b>		
The foregoing application is hereby approved and permit issued by the Permitting Authority subject to full compliance by the Applicant with all provisions and conditions stated in the Utility Accommodation Policy of Marathon County including the Indemnification as included in 96.03 of the WCHA Utility Accommodation Policy in effect on the date of the application.		
Supplemental Provisions Attached: <input type="checkbox"/> Yes <input type="checkbox"/> No		
By: _____ (Authorized Representative for County)	Title: _____	Date: _____