



PERMIT TO OCCUPY THE PUBLIC RIGHT-OF-WAY

Permit #: _____
 Effective Date: _____
 Expiration Date: _____
 Fee: _____
 Paid (yes or no): _____

Rev. 04-10-15

Applicant Information

Name (print): Colleen Vanden Heuvel Company: My Little People Daycare
 Address: 1007 N. Badger Ave Telephone: 920-205-9411 FAX: _____
Appleton, WI 54914 e-mail: cva.bva.a@yahoo.com
 Applicant Signature: Colleen Vanden Heuvel Date: _____

Occupancy Information

General Description: Commercial St the back of my house
 Street Address: _____ Tax Key No.: _____
 - or -
 Street: _____ From: _____ To: _____
 Multiple Streets: _____

(Department use only)

Occupancy Type

Sub-Type

Location

<input type="checkbox"/> Permanent (\$40)	<input type="checkbox"/> Sandwich Board	<input type="checkbox"/> Sidewalk
<input type="checkbox"/> Temporary - max. 35 days (\$40)	<input type="checkbox"/> Tables / Chairs	<input type="checkbox"/> Terrace
<input type="checkbox"/> Amenity/Annual (\$40)	<input type="checkbox"/> Dumpster	<input type="checkbox"/> Roadway
<input type="checkbox"/> Blanket/Annual (\$250)	<input type="checkbox"/> POD / Container	
<input type="checkbox"/> Block Party (\$15)	<input type="checkbox"/> Obstruction / Other	

Additional Requirements

Plan/Sketch Certificate of Insurance Bond
 Other: _____

Traffic Control Requirements

N/A

Contact Traffic Division (832-2379) 1 business day prior to any lane closure, or 2 business days prior to a full road closure.

Type of Street:	Proposed Traffic Control:
<input type="checkbox"/> Arterial/CBD	<input type="checkbox"/> City Manual Page(s)
<input type="checkbox"/> Collector	<input type="checkbox"/> State Manual Page(s)
<input type="checkbox"/> Local	<input type="checkbox"/> Other (attach plan)

Additional Requirements: _____

Approved by: _____ Date: _____

This permit approval is subject to the following conditions:

1. Permittee is responsible to obtain any further permits that may be required as part of this occupancy.
2. Permittee shall adhere to any plan(s) that were submitted to the City of Appleton as part of this application.
3. This permit is subject to IMMEDIATE REVOCATION and/or issuance of a MUNICIPAL CITATION if conditions of the permit are not met.
4. This permit is subject to IMMEDIATE REVOCATION if unfavorable traffic conditions develop during the period the occupancy is permitted.
- 5.
- 6.

This permit is issued to the applicant upon payment of the permit fee and is expressly limited to the location and type described herein. The applicant, in exchange for receiving this permit, warrants that all street occupancies will be performed in conformity to City ordinances, standards and policies, be properly barricaded and lighted, and be performed in a safe manner. By applying for and accepting this permit, the applicant assumes full liability and/or any costs incurred by the City for corrective work required to bring the subject area into compliance with said ordinances, standards, policies and permit conditions. No occupancy shall occur prior to approval of this permit by the Department of Public Works.

The Grantee shall guarantee at their expense, the repair or replacement of pavement, sidewalk and any other facilities within the public right-of-way damaged or destroyed by the Grantee or any sub-contractor working for them. The Grantee shall assume complete and full liability and responsibility, in accordance with existing ordinances and policies, in the event of injury or damage to persons or property resulting from their facilities within the public right-of-way.

APPROVED BY: _____

(Department of Public Works)

DATE: _____

Insurance and Bond Coverage:

Insurance Carrier: Foremost

Insurance Agent Name and Phone Number: Wendy Diedrich 920-733-7331

Policy Number: 500006369000

Policy Period: 7/5/2023 - 7/5/2024

* Bond Carrier: _____

* Bond Agent Name and Phone Number: _____

* Bond Number: _____

* Bond Period: _____

I confirm that I have the authority to sign and certify the information contained herein as the permittee/licensee or duly authorized representative of the entity obtaining this permit/license. I have reviewed and understand the insurance and bonding requirements of the City of Appleton. I hereby certify that I, or the company I represent have insurance and a bond in the amounts required to obtain this permit/license. I have named the City of Appleton as an additional insured for purposes of this permit/license and have provided the name of my insurance and bond carriers, the policy numbers and policy periods above. Further, I agree to maintain appropriate insurance coverage for the duration of this permit/license and to indemnify against any and all liability, loss, damage and expenses and costs including attorneys' fees arising out of the activities performed as described herein, caused in whole or in part by any negligent act or omission of the applicant, anyone directly or indirectly employed by any of them, which may arise from the use of city right of way or property under this permit or license.

I certify that this application, and all information and documentation provided therein, is true and accurate.

Company Name: _____

Print Name: _____

Signature: _____

Date: _____

* Bonds are required for the following types of work only:

- Plumbing in the public right-of-way: \$5,000.00 Permit Bond (Code Section 4-265)
- Demolition of Buildings: \$5,000.00 Permit Bond (Code Section 4-188(a)(2))
- Sewer lateral sealing in the public right-of-way: \$5,000.00 Permit Bond (Code Section 4-188(c))
- Moving of Buildings: \$5,000.00 Permit Bond (Code Section 4-207(5))
- Cement Finisher's License: \$5,000.00 License Bond (Municipal Code Section 9-33)
- Excavation or place facilities in the public right-of-way: \$5,000.00 Permit Bond (Code Section 16-110)

N Linwood Av

W Commercial St 1700

STOP

SPEED
LIMIT
25

END
SCHOOL
ZONE



N Linwood AV 1000







Linwood

STOP

2

2 HR
PARKING
ON SCHOOL DAYS
7:00 AM TO 4:00 PM

Linwood Ave

STOP

