



Marathon City – Director of Public Works
311 Walnut Street PO Box 487
Marathon City, WI 54448
(715) 443-2221

Application Accepted:	
Accepted by:	
Approval Date:	

Location where utilities will be installed: _____

Will multiple addresses be impacted? Yes No

If yes, please list all addresses: _____

Section 1 - Applicant

Applicant is the: Owner (of the real property) Lessee (of the real property)

Contractor Utility

Name of Owner of Real Property: _____

Address: _____

Project Contact Person: _____

Phone #: _____ Mobile #: _____ Email: _____

Name of Lessee of Real Property: _____

Address: _____

Phone #: _____ Mobile #: _____ Email: _____

Section 2 - Contractors

Contractor 1: _____

Bond#: _____ License #: _____

Address: _____

Project Contact Person: _____

Phone #: _____ Mobile #: _____ Email: _____

Contractor 2: _____

Bond#: _____ License #: _____

Address: _____

Project Contact Person: _____

Phone #: _____ Mobile #: _____ Email: _____

Contractor 3: _____

Bond#: _____ License #: _____

Address: _____

Project Contact Person: _____

Phone #: _____ Mobile #: _____ Email: _____

Contractor 4: _____

Bond#: _____ License #: _____

Address: _____

Project Contact Person: _____

Phone #: _____ Mobile #: _____ Email: _____

****Picture or rendering must be attached depicting utility placement with before and after view.****

Section 3 – Utility and Structure Details

Utility Category: (Check all that apply)

Fiber Cable Power Gas Water Sanitary Sewer Storm Sewer

Permanent Temporary Overhead Buried

Purpose:

Install Repair Replace Abandon Other _____

Proposed Project Start Date: _____

Anticipated Project Duration: _____

Utility Routing (Please provide a text description, picture and shop drawing).

Will any portion of the utility work extend on, over, under or occupy any section of the public way?

Yes No

If yes, please explain and provide photos of location. _____

Will the utility construction require opening of a public street? Yes No

If yes, please explain and provide photos of location. _____

Total Street frontage impacted by work: _____ Feet

Distance from utility to curb line or road edge: _____ Feet

What is the total cost for the utility construction project? _____

****Picture or rendering must be attached depicting utility placement with before and after view.****

Section 4 – Signatures

Owner of Real Property: _____ Date:

Lessee of Real Property: _____ Date:

Contractor 1: _____ Date:

Contractor 2: _____ Date:

Contractor 3: _____ Date:

Contractor 4: _____ Date:

Village Approval: _____ Date:

Fee Paid: Yes No

****Picture or rendering must be attached depicting utility placement with before and after view.****