

WEST LAKELAND TOWNSHIP

P.O. Box 447
 Lake Elmo, Minnesota 55042
 651-436-4773

APPLICATION FOR PUBLIC UTILITY PERMIT

Date _____ Permit No. _____

Site Address	
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Applicant: Owner _____ Contractor _____

Property Owner	Name/Company _____ Phone No. _____ Address _____
Contractor	Company _____ Phone No. _____ Contact Person(Print) _____ Phone No. _____ Address _____ City _____ State _____ Zip _____

Work Type; <input type="checkbox"/> New <input type="checkbox"/> Alteration <input type="checkbox"/> Repair <input type="checkbox"/> Remove/install Permit sub-type: <input type="checkbox"/> Grading/drainage <input type="checkbox"/> Curb cut <input type="checkbox"/> Blvd excavation <input type="checkbox"/> Street excavation <input type="checkbox"/> Street vacation <input type="checkbox"/> Public utility

Description of Work: _____

The undersigned hereby represents upon all of the penalties of the law, for the purpose of including the Town of West Lakeland to take the action herein requested, that all statements are true, and that all work herein will be completed in accordance with Ordinance 4.11 (Regulations of Utility) of Town of West Lakeland and the State of Minnesota. The undersigned agrees to meet all applicable permit fees prior to commencement of work.

Office Use Only	Applicant's Signature _____ Date _____ Permit Approved by: _____ Date Approved: _____
Permit Fee: \$120 Permit Fee Paid: _____	