



# APPLICATION FOR PUBLIC RIGHT-OF-WAY REGISTRATION

Date:

## REGISTRATION INFORMATION

Name:	
Corporate/Regional Contact Person (if applicable):	
Digger's Hotline Registration Certificate Number:	
Address:	Email:
Phone Number:	Fax Number:

## LOCAL EMERGENCY REPRESENTATIVE INFORMATION

Must be available 24 hours per day

Name:	
Address:	
Email:	24/7 Cell Phone Number:
Office Phone Number:	Fax Number:

## ATTACHMENTS

Mark and include all that apply

- Corporation's business certificate under Wis. Stats. (if entity is a corporation, LLC or LLP)
- Corporate certificate of authority from Wisconsin Public Service Commission
- Certificate of liability insurance
- Indemnity and Hold Harmless Agreement (page 4)

For existing poles and towers, registrant must provide the following for all facilities:

- Structural certification stamped by a registered professional engineer in the State of Wisconsin (including, but not limited to, structural sufficiency and vertical plumbness)
- Statement regarding impact of stray voltage (testing may be required)

### **ANNUAL REGISTRATION FEE INFORMATION**

*Please note that all Registration Fees are waived for 2021. Fee Schedule for 2022 will be issued in Fall of 2021.*

The registrant shall keep all of the information listed above current at all times by providing the Department with information as to any changes within fifteen (15) working days following the date on which the registrant has knowledge of any change.

### **INSURANCE REQUIREMENTS FOR CITY OF KAUKAUNA "SMALL EXPOSURE JOBS"**

All insurance shall be in full force prior to commencing work and remain in force until the entire job is completed or the length of time that is specified in the permit.

#### **1) General Liability Coverage**

- a) Commercial General Liability
  - i) \$1,000,000 general aggregate
  - ii) \$1,000,000 products - completed operations aggregate
  - iii) \$500,000 personal injury and advertising injury
  - iv) \$500,000 each occurrence limit
- b) Claims made form of coverage is not acceptable.
- c) Insurance **must** include:
  - i) Premises and Operations Liability
  - ii) Blanket Contractual Liability
  - iii) Personal Injury
  - iv) Explosion, collapse and underground coverage
  - v) Products/Completed Operations
  - vi) The general aggregate must apply separately to this project/location

#### **2) Business Automobile Coverage**

- a) Limits - \$250,000 each person/\$500,000 each accident for Bodily Injury and \$100,000 for Property Damage

OR

\$500,000 Combined Single Limit for Bodily Injury and Property Damage each accident

- b) Must cover liability for "Any Auto" - including Owned, Non-Owned and Hired Automobile Liability

#### **3) Workers Compensation and Employers Liability** – If required by Wisconsin State Statute or any Workers Compensation Statutes of a different state.

- a) Must carry coverage for Statutory Workers Compensation and Employers Liability limit of:
  - i) \$100,000 Each Accident

- ii) \$500,000 Disease Policy Limit
- iii) \$100,000 Disease - Each Employee

**4) Additional Provisions**

- a) Certificates of Insurance - A copy of the Certificate of Insurance must be on file with the City Clerk.
- b) Notice - NOTE: City of Kaukauna requires 30 day written notice of cancellation, non-renewal or material change in the insurance coverage.
- c) The insurance coverage required must be provided by an insurance carrier with the "Best" rating of "A-VII" or better. All carriers shall be admitted carriers in the State of Wisconsin.

**PUBLIC RIGHT-OF-WAY REGISTRATION IS VALID UNTIL DECEMBER 31ST OF EACH CALENDAR YEAR.**

By signing this form you are acknowledging that you, the Registrant, will comply with Section 8.06 of the City of Kaukauna Code of Ordinances, all local, state and federal codes including, but not limited to, safety, building, traffic control codes, and the Manual of Uniform Traffic Control Devices (MUTCD), and you agree that all work will be done according to good engineering practice, that public safety will be procured, and the street will be properly restored.

Owner's Authorized Representative Signature:

Date:

\_\_\_\_\_

\_\_\_\_\_

Local Emergency Representative Signature:

Date:

\_\_\_\_\_

\_\_\_\_\_

**Return this form along with payment to:**

City of Kaukauna  
Public Works Department  
Attn: John Neumeier  
144 W 2<sup>nd</sup> Street  
Kaukauna, WI 54130



**INDEMNITY AND HOLD HARMLESS AGREEMENT**

City of Kaukauna Code of Ordinances Section 8.06 Right-of-Way Management.

Registrant Name:

By registering with the City of Kaukauna, or by accepting a permit under Section 8.06 of the City of Kaukauna Code of Ordinances, a registrant or Permittee, as the case may be, herein and hereby agrees to indemnify, defend, and hold harmless the City, its officers, boards, committees, commissions, elected officials, employees and agents (collectively, "Indemnified Parties"), from and against all loss or expense (including liability costs and attorney's fees) by reason of any claim or suit, or of liability imposed by law upon an Indemnified Party for damages because of bodily injury, including death at any time resulting therefrom, sustained by any person or persons or on account of damages to property, including loss of use thereof, arising from, in connection with, caused by or resulting from the Permittee's acts or omissions in the exercise of its rights under this permit, whether caused by or contributed to by the City or its agents or employees except in such cases where cause by the sole negligence or willful misconduct of the City.

Dated the \_\_\_\_\_ day of \_\_\_\_\_, 20 \_\_\_\_\_.

Owner's Authorized Representative Printed Name:

\_\_\_\_\_

Owner's Authorized Representative Signature:

\_\_\_\_\_

