

TOWN OF MACKFORD

N2270 County Road A
Markesan, WI 53946
(608)297-0107

CULVERT PERMIT APPLICATION

DATE: _____

NAME: _____

ADDRESS: _____

PHONE: _____

CONTRACTOR: _____

ADDRESS: _____

PHONE: _____

MARKING INSTRUCTIONS: Place 2 wooden stakes in drive-way location. After inspection of location, the Township will notify application of placement and size of culvert.

DIAMETER: _____

LENGTH: _____

ENDWALLS: YES or NO

SPECIAL NOTES:

TOWNSHIP CONTACT: Steve Davison (920) 398-3789

TOWNSHIP SIGNATURE: _____

DATE: _____

RETURN FORM by email or mail:

Email: clerk@townofmackfordwi.gov

Mailing Address:
Town of Mackford
W1166 County Road X
Markesan, WI 53946