

TOWN OF WEST POINT

APPLICATION FOR PERMIT TO USE TOWN PROPERTY UNDER TOWN CODE §§ 10.48 – 10.54

APPLICANT(S) [FEE TITLE HOLDERS] MUST PROVIDE THE FOLLOWING INFORMATION:

APPLICANT'S NAME: _____

CO-APPLICANT'S NAME: _____

MAILING ADDRESS: _____

PROPERTY ADDRESS [IF DIFFERENT]: _____

LEGAL DESCRIPTION OF APPLICANT'S PROPERTY AND TOWN OWNED PROPERTY: _____

(Attach Separate Sheet if Necessary)

TAX PARCEL NO.: _____

PHONE: [HOME]: _____ [WORK]: _____ [CELL]: _____

[Attach site location/map of Town-owned Property for which Application sought and applicant's adjoining property.]

PROPOSED USE OF TOWN PROPERTY (CHECK ALL THAT APPLY):

- 1. Maintain an existing driveway between the road right-of-way and the Applicant's parcel.
- 2. Maintain an existing structure on Town Property which is in good repair and subject to use by general public.
- 3. Place or situate benches and tables on Town Property between April 1st and October 31st.
- 4. Mowing grass and otherwise maintain Town Property.

NAME AND ADDRESS OF ANY OTHER OWNER(S) ADJOINING TOWN PROPERTY FOR WHICH APPLICANT SOUGHT AND ANY USE BEING MADE OF THE TOWN PROPERTY BY SAID ADJOINING OWNER(S)

NAME

ADDRESS

USE (IF ANY) _____

CERTIFICATE OF INSURANCE INFORMATION (§ 10.52 REQUIRES EACH APPLICANT TO OBTAIN A POLICY OF PUBLIC LIABILITY INSURANCE, NAMING THE TOWN AS AN ADDITIONAL INSURED IN AN AMOUNT OF NOT LESS THAN THE COMBINED SINGLE UNIT OF \$500,000 FOR BODILY INJURY, DISABILITY OR DEATH).

- 1. INSURANCE COMPANY'S NAME: _____
- 2. AGENT'S NAME: _____
- 3. AGENT'S ADDRESS: _____
- 4. AGENT'S PHONE: _____
- 5. DATE POLICY WAS ISSUED: _____
- 6. DATE POLICY EXPIRES: _____

ATTACH A COPY OF THE CERTIFICATE OF INSURANCE.

TENANT INFORMATION

If property is currently being rented, identify the name and telephone number of the tenant(s).

Tenant Name: _____ Phone: _____

Tenant Name: _____ Phone: _____

If this Permit is granted, Applicant shall obtain, within five (5) days of receiving the Permit, Tenant's consent that Tenant will abide by the terms and conditions of the Permit. This is an on-going obligation of the Applicant and shall apply if the Applicant rents the property after the Permit is granted. Notwithstanding lease, Applicant remains liable for compliance of all tenant(s) with provisions of Permit granted by Town.

TERMS AND CONDITIONS

- A. If the Application is for a driveway, the maintenance, cost of repair, snowplowing and any other expense of the driveway shall be at the Applicant's exclusive cost and of no cost to the Town. The driveway shall be maintained, repaired and removed in accordance with the specifications of the Town Code.
- B. Any Permit issued pursuant to this Ordinance may not be assigned or transferred without the prior express written consent of the Town.
- C. The issuance of a Permit shall not allow off-season storage of picnic tables or benches on Town Property other than during the time specified on this Application. Storage of boats or pier sections or any other personal property on Town Property is always prohibited as is depositing of yard waste and brush.
- D. The issuance of a Permit shall not confer upon any Applicant any ownership interest in the Town Property.
- E. The Town must be listed as an additional insured on the Certificate of Insurance and the policy of insurance must provide that the Town must be notified in the event the policy is canceled, discontinued, or materially changed.

BY EXECUTING THIS APPLICATION, THE APPLICANT(S) AGREES THAT IF THE APPLICATION IS GRANTED AND A PERMIT IS ISSUED, THE APPLICANT, AND APPLICANT'S HEIRS AND PERSONAL REPRESENTATIVES AND ASSIGNS SHALL INDEMNIFY AND HOLD HARMLESS THE TOWN FROM ANY AND ALL CLAIMS FOR DAMAGES ARISING OUT OF THE APPLICANT'S USE AND ENJOYMENT OF THE TOWN PROPERTY, UNLESS SUCH CLAIM FOR DAMAGES ARISE OUT OF THE NEGLIGENT OR INTENTIONAL ACTS OF THE TOWN, ITS OFFICERS OR AGENTS.

Signature(s): _____ Date: _____
_____ Date: _____

PLEASE RETURN COMPLETED APPLICATION, CERTIFICATE OF INSURANCE AND CHECK WITH FEE MADE PAYABLE TO THE TOWN OF WEST POINT TO:

EDITH EBERLE, CLERK
TOWN OF WEST POINT
N2114 RAUSCH ROAD
LODI, WI 53555
TOWN HALL PHONE: 592-7059

OFFICE USE ONLY – DO NOT WRITE BELOW THIS LINE

- _____ Application Mailed or Hand Delivered
- _____ Completed Application and Certificate of Insurance Received
- _____ Fee Paid (Amount \$_____, Check No. _____)
- _____ Application Presented to Board
- _____ Application is: Approved Denied
- _____ Permit Issued and Mailed