



2026 Licensing Information

Attached is your annual licensing information. We ask to have all the forms completed and sent in as soon as possible. If you have a current Bond with our department, you will not need to send that again. Just make sure to fill out all your forms and have your updated insurance and licensing fees.

Remember, if you have ever been licensed for Right of Way work in the past, you do not pay that License fee. The licenses expire on Dec 31, 2026. Please send in your forms and information as soon as possible, so things are all ready to go before the busy season of spring hits. Instead of us sending all the rules and ordinances for each license, all of the paperwork can be found at:

www.winonamn.gov, Departments, Click on Public Works, Engineering and Licenses and Permits.

Please let Michelle know of any questions you may have. She can be reached at mmarxhausen@winonamn.gov or 507-457-8269. Thank you!

Attached are copies of our Engineering permits to be used when applying for a permit.



Engineering Department
207 Lafayette-Suite 205
Winona, MN 55987
Phone: 507-457-8269
Fax: 507-452-1239
www.winonamn.gov

FOR OFFICE USE ONLY
CONTRACTOR #:
FEES: \$
DATE:
APPROVED BY:
INVOICE#:
RECEIPT#:

License Application Guidelines & Checklist

License Type

Definition: This application is for General contractors who desire to do work in the City of Winona right of way, including the following:

- Excavation in the City of Winona's Right of Way
- Construct, alter and repair water, sanitary and storm sewer services in the City of Winona's Right of Way
- Construct, alter and repair sidewalks, handicap ramps, driveway/alley approaches, and curb & gutter in the City of Winona

This license authorizes an individual to perform only the work applied for and approved by the City of Winona.

Please check the following that you wish to apply for:

Right of Way License (Excavation in the City of Winona Right Of Way)

Drainlayers License (Construct, alter and repair water, sanitary and storm sewer services in the City of Winona right of way)

Concrete License (Construct, alter and repair sidewalks, handicap ramps, driveway/alley approaches and curb and gutter in the City of Winona)

Staff Initials	Application Checklist-Please check the boxes as you complete them
	<input type="checkbox"/> License Application (Form #1)
	<input type="checkbox"/> Subcontractor Information (attached to application-Form #1)
	<input type="checkbox"/> Insurance certificate with the City of Winona named as an additional insured for Commercial General Liability per occurrence in the amount of \$1,500,000 (umbrella policies are acceptable-see Sample Form #2)
	<input type="checkbox"/> Proof of Workers Compensation Coverage (Form #3)
	<input type="checkbox"/> \$10,000 Bond on City of Winona Bond Form (hard copy original is required-Form #4)
	<input type="checkbox"/> Copy of current Master Plumber card or Pipelayers card (For Drainlayers License)
	<input type="checkbox"/> Individuals who are D/B/A will need to attach a certificate from the State of MN
	<input type="checkbox"/> Fee for license (Check payable to City of Winona, credit card over the phone or cash) <input type="checkbox"/> \$50.00-Right of Way Registration - One Time Fee-only for new ROW contractors! <input type="checkbox"/> \$35.00-Drainlayers License Fee-Due Annually <input type="checkbox"/> \$35.00-Concrete License Fee-Due Annually
	<input type="checkbox"/> I have read and reviewed the appropriate policies, guidelines and procedures, including the City of Winona's ordinances. These are found on at: http://www.cityofwinona.com/city-services/public-works/engineering/permits-licensing/
REQUIRED:	Signature of Business Owner:
	Additional Information Your License Application <ol style="list-style-type: none">Incomplete Applications will be returned, along with fees, without processing. All fees must be paid with the application.All applications must be signed by an authorized signatory (e.g., owner, partner, officer or principal).No license will be issued for longer than one year.Licenses are not transferrable.Make a duplicate copy of this packet for your personal records before submitting. Bond <ol style="list-style-type: none">Applicants must use and fully complete the attached City of Winona Bond Form. The bond must be continuous and must remain valid until cancelled. The bond must be issued by a financial institution licensed in MN.The amount of the bond must be the same as the amount listed above (\$10,000.00).The name of the licensee and the principal on the bond must be the same.The bond must be signed and notarized by the principal and agent/surety. There must be one witness for each signature.The bond must include acknowledgement of surety and the agent's power of attorney.

**Engineering Department**

207 Lafayette-Suite 205
Winona, MN 55987
Phone: 507-457-8269
Fax: 507-452-1239
www.cityofwinona.com

FORM #1**Application for Right of Way/Drainlayers/Concrete License**

BACKGROUND INFORMATION			
Legal/Corporate Name of Business		Trade Name (D/B/A)	Telephone/Cell Phone Numbers
Business Address		City	State Zip
Mailing Address (If different than business address)		City	State Zip
Email Address		Emergency Contact	Emergency Contact Cell Phone
Name of Qualified Master Plumber/Certified Pipeplayer		Master Plumber License Number/Pipeplayer Card # and Expiration Date	Signature of Master Plumber/Certified Pipeplayer
Name of Business Owner/Contact Person:		Gopher State One Call #	Type of Ownership <input type="checkbox"/> Corporation <input type="checkbox"/> LLC <input type="checkbox"/> Sole Proprietor <input type="checkbox"/> Partnership <input type="checkbox"/> Non profit

SUBCONTRACTOR INFORMATION

Legal/Corporate Name of Business		Telephone Number	Fax Number	Email
Business Address	City	State	Zip	Gopher State One Call #

*Please make sure to have your insurance agency fill out all the proper information including the highlighted areas.



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
01/30/2015

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERNS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER AGENCY NAME 123 MAIN ST BURBANK CA 91502	CONTACT NAME: PHONE (A/C, No, Ext): E-MAIL: ADDRESS:	AGENT NAME
		FAX (A/C, No):
	INSURER(S) AFFORDING COVERAGE	NAIC #
	INSURER A : INSURANCE COMPANY NAME	12345
INSURED INSURED NAME 123 MAIN ST BURBANK CA 91502	INSURER B :	
	INSURER C :	
	INSURER D :	
	INSURER E :	
	INSURER F :	

COVERAGES		CERTIFICATE NUMBER:		REVISION NUMBER:		
THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.						
INSR LTR	TYPE OF INSURANCE	ADD'L SUBR INSR / WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	GENERAL LIABILITY	X	POLICY NUMBER	01/30/2015	01/30/2016	EACH OCCURRENCE \$ 1,000,000
	X COMMERCIAL GENERAL LIABILITY CLAIMS-MADE X OCCUR					DAMAGED & RENTED PREMISES (Ea occurrence) \$ 300,000 MED EXP (Any one person) \$ 10,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMP/OP AGG \$ 2,000,000 \$
GEN'L AGGREGATE LIMIT APPLIES PER:						
X POLICY	PRO- JECT	LOC				
AUTOMOBILE LIABILITY						
ANY AUTO ALL OWNED AUTOS HIRED AUTOS	SCHEDULED AUTOS NON-OWNED AUTOS					COMBINED SINGLE LIMIT (Ea accident) \$ BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$
UMBRELLA LIAB	OCCUR					EACH OCCURRENCE \$ AGGREGATE \$ \$
EXCESS LIAB	CLAIMS-MADE					
DED	RETENTION \$					
WORKERS COMPENSATION AND EMPLOYERS' LIABILITY						
ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED?	Y / N	N / A				WC STATU- TORY LIMITS E. L. EACH ACCIDENT E. L. DISEASE - EA EMPLOYEE E. L. DISEASE - POLICY LIMIT
If yes, describe under DESCRIPTION OF OPERATIONS below						
DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schedule, if more space is required)						
Certificate Holder is Also an Additional Insured			*City of Winona must be listed as additional insured. This must be also written in the description.			
CERTIFICATE HOLDER			CANCELLATION			
ADDITIONAL INSURED NAME 123 MAIN ST BURBANK CA 91502			SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.			
			AUTHORIZED REPRESENTATIVE			

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2019 Minnesota Statutes

466.04 MAXIMUM LIABILITY.

Subdivision 1. **Limits; punitive damages.**

(a) Liability of any municipality on any claim within the scope of sections 466.01 to 466.15 shall not exceed:

- (1) \$300,000 when the claim is one for death by wrongful act or omission and \$300,000 to any claimant in any other case, for claims arising before January 1, 2008;
- (2) \$400,000 when the claim is one for death by wrongful act or omission and \$400,000 to any claimant in any other case, for claims arising on or after January 1, 2008, and before July 1, 2009;
- (3) \$500,000 when the claim is one for death by wrongful act or omission and \$500,000 to any claimant in any other case, for claims arising on or after July 1, 2009;
- (4) \$750,000 for any number of claims arising out of a single occurrence, for claims arising on or after January 1, 1998, and before January 1, 2000;
- (5) \$1,000,000 for any number of claims arising out of a single occurrence, for claims arising on or after January 1, 2000, and before January 1, 2008;
- (6) \$1,200,000 for any number of claims arising out of a single occurrence, for claims arising on or after January 1, 2008, and before July 1, 2009;
- (7) \$1,500,000 for any number of claims arising out of a single occurrence, for claims arising on or after July 1, 2009;
- (8) twice the limits provided in clauses (1) to (7) when the claim arises out of the release or threatened release of a hazardous substance, whether the claim is brought under sections 115B.01 to 115B.15 or under any other law; or
- (9) \$1,000,000 for any number of claims arising out of a single occurrence, if the claim involves a nonprofit organization engaged in or administering outdoor recreational activities funded in whole or in part by a municipality or operating under the authorization of a permit issued by a municipality.

(b) No award for damages on any such claim shall include punitive damages.

Subd. 1a. **Officers and employees.**

The liability of an officer or an employee of any municipality for a tort arising out of an alleged act or omission occurring in the performance of duty shall not exceed the limits set forth in subdivision 1, unless the officer or employee provides professional services and also is employed in the profession for compensation by a person or persons other than the municipality.

Subd. 1b. **Total claim.**

The total liability of the municipality on a claim against it and against its officers or employees arising out of a single occurrence shall not exceed the limits set forth in subdivision 1.

Subd. 2. **Inclusions.**

The limitation imposed by this section on individual claimants includes damages claimed for loss of services or loss of support arising out of the same tort.

Subd. 3. **Disposition of multiple claims.**

Where the amount awarded to or settled upon multiple claimants exceeds the applicable limit under subdivision 1, paragraph (a), clauses (4) to (9), any party may apply to any district court to apportion to each claimant a proper share of the total amount limited by subdivision 1. The share apportioned each claimant shall be in the proportion that the ratio of the award or settlement made to each bears to the aggregate awards and settlements for all claims arising out of the occurrence.

History: [1963 c 798 s 4](#); [1976 c 264 s 1-3](#); [1983 c 121 s 28](#); [1983 c 331 s 2,3](#); [1986 c 444](#); [1989 c 325 s 50](#); [1997 c 210 s 3,4](#); [2006 c 232 s 2](#); [2012 c 131 s 2,3](#)

CERTIFICATION OF COMPLIANCE
MINNESOTA WORKERS COMPENSATION LAW

Minnesota Statute 176.182 requires every state and local licensing agency to withhold the issuance or renewal of a license or permit to operate a business or engage in an activity in Minnesota until the applicant presents acceptable evidence of compliance with the workers compensation insurance coverage requirement of MSS Chapter 176 to the licensing agency itself. The information required is: the name of the insurance company, the policy number, and dates of coverage or the permit to self-insure. This information should be returned to the licensing agency and will be retained in their files.

This information is required by law, and licenses and permits to operate a business may not be issued or renewed if it is not provided and/or is falsely reported. Furthermore, if this information is not provided or falsely stated, it may result in a \$1,000 penalty assessed against the applicant by the Commissioner of the Department of Labor and Industry.

Insurance Company Name: _____
(NOT the insurance agent)

Policy Number: _____

Dates of Coverage _____ to _____

I am not required to have workers compensation liability coverage because:

() I have no employees.
 () I am self-insured. *(Include permit to self-insure)*
 () I have no employees who are covered by the workers compensation law.
(These include: Spouse, Parents, Children and certain farm employees)

I certify and warrant that an insurance certificate for workers compensation will be provided if the exemption status no longer exists.

I hereby agree to indemnify and hold harmless the City of Winona and its agents and employees from and against all claims, losses, and expenses including attorney's arising out of or resulting from any workers compensation claim.

I understand that the information provided above will be verified by the Minnesota Department of Labor and Industry. I understand that I may be subject to a penalty if the information is false.

I certify that the information provided above is accurate and complete and that a valid workers compensation policy will be kept in effect at all times as required by law.

Name: _____
(Last, First, Middle)

D/B/A: _____
(Business name if different than your name)

Business Address: _____

City, State, Zip: _____ Phone: _____

Signature: _____ Date: _____

GENERAL LICENSE BOND

BOND NO.	AMOUNT	EFFECTIVE DATE	ENDING DATE
	\$10,000.00		This bond shall be considered to be a continuing bond and valid until cancelled.

KNOW ALL MEN BY THESE PRESENTS:**THAT** _____;

(Business name as Registered in Minnesota; or if individual sole proprietor, individual's name.)

, located at _____,

(d/b/a; doing business as name, if applicable)

(Business Address)

(City)

(State)

(Zip Code)

(Telephone Number)

, as Principal, and

(Surety Company Name)

(Surety Company Address)

(City)

(State)

(Zip Code)

(Telephone Number)

, located at _____, a corporation under

the laws of the State of _____, duly licensed and authorized to transact a corporate surety business in the State of Minnesota, as Surety, are held and firmly bound unto the City of Winona, a municipal corporation in the County of Winona and State of Minnesota (hereinafter called the "City"), in the sum of **Ten Thousand and No/100ths (\$10,000.00) Dollars**, lawful money of the United States of America, for the use and benefit of said City and of any and all persons suffering damages by reason of the breach of any of the conditions of the bond, for the payment of which sum well and truly to be made to said City and to such person, its, or his or her assigns, we bind ourselves, our heirs, executors, administrators, successors, and assigns, jointly and severally, firmly by these presents.

WHEREAS, the conditions of this obligation are such that the above named Principal desires to carry on the following business within the City (check all those that apply):

- A. sidewalks, handicap ramps, driveway approaches, curb and gutter construction; and/or
- B. connections to water, sewers and drains; and/or
- C. right of way excavation;

in accordance with and pursuant to City Code and is about to apply or has applied for a License to so engage in said above business; and whereas, said Principal proposes to apply for renewal licenses from year to year thereafter to carry on said business.

NOW THEREFORE, in case such license shall be issued, if said above named Principal, shall, well, truly and faithfully perform all work entered upon or contracted for by said Principal, and shall strictly comply with all the provisions and requirements of City Code applicable thereto, now or hereafter existing, and with the conditions of any and all permits which may be issued to said licensee thereunder, as related to the work entered upon or contracted for by him, her or it, as such indicated above herein, and shall, well and truly indemnify and save harmless said City, its officials and employees, and their successors, from and on account of any and all judgments, claims, demands, losses, costs, expenses (including attorney fees), and liabilities of any kind whatsoever which said City and any or all of the persons above enumerated may sustain or which may be recovered from it

or them, from or by reason of the issuance of such license, or by reason of any act, neglect or thing done under or by virtue of the authority given in such license, or in any way connected with, relating to, or growing out of any work performed by said Principal, his, her or its agents and employees, or anyone in any way under his, her or its supervision and direction, or if such license shall not be issued, then this obligation to be null and void; otherwise to be and remain in full force and effect.

The above named Surety hereby consents to be bound by this obligation whether or not the above named Principal is correctly named as an individual, partnership, firm, association or corporation and notwithstanding any informality in its execution by reason thereof.

This bond is to be a continuing bond furnished as required for the issuance of the license for the current year and for each succeeding year, unless cancelled. This bond may be cancelled at any time upon giving the said Principal and the City of Winona 30 days written notice, said notice to be served by certified mail, return receipt requested, whereupon, except as to any liabilities or indebtedness incurred or accrued, prior to the termination of this said 30 day notice, the liability of the Surety under this bond shall cease.

IN WITNESS WHEREOF, we have hereunto set our hands and seals this _____ day of _____, 20_____.

Print Name of Principal

By: _____
Signature of Principal
Its _____

Attest: _____
Its _____

(Surety Seal)

Print Name of Surety

Signature of Attorney in Fact (Surety)

ACKNOWLEDGMENTS

ACKNOWLEDGMENT AS TO SURETY

STATE OF _____)
COUNTY OF _____)
) ss.

On this _____ day of _____, 20____, before me appeared _____, to me personally known, who being by me duly sworn, did say that he/she is the Attorney-in-fact for the corporation, _____ (Name of Surety), which executed the above Bond as Surety; that the seal affixed to said Bond as the seal of said corporate Surety is the seal of said corporation, and that said Bond was executed in behalf of said corporate Surety by authority of its Board of Directors; that said corporate Surety holds a certificate of the Insurance Commissioner of the State of Minnesota, showing that it is authorized to contract as a surety, and the Attorney-in-fact above named acknowledged said Bond to be the free act and deed of said corporate Surety.

Notary Public
My Commission Expires: _____

ACKNOWLEDGMENT AS TO PRINCIPAL (INDIVIDUAL)

STATE OF _____)
COUNTY OF _____)
) ss.

On this _____ day of _____, 20_____, before me appeared _____ to me known to be the person described in and who executed the foregoing instrument, and acknowledged that he/she executed the same as his/her free act and deed.

Notary Public
My Commission Expires:

ACKNOWLEDGMENTS

ACKNOWLEDGMENT AS TO PRINCIPAL (PARTNERSHIP)

STATE OF _____)
COUNTY OF _____)
) ss.

On this _____ day of _____, 20_____, before me appeared _____ to me personally known, who being by me duly sworn, did say that he/she is a Partner of _____, the partnership described in the foregoing instrument, and that said instrument was executed in behalf of said partnership and _____ acknowledged said instrument to be the free act and deed of said partnership.

Notary Public
My Commission Expires: _____

ACKNOWLEDGMENT AS TO PRINCIPAL (CORPORATION)

STATE OF _____)
COUNTY OF _____)
) ss.

On this _____ day of _____, 20____, before me appeared _____ and _____, to me personally known, who being by me duly sworn did say that they are respectively the _____ and _____ of _____, the corporation described in and who executed the foregoing instrument; that the seal affixed to the foregoing instrument is the corporate seal of said corporation; that said instrument was executed in behalf of said corporation by authority of its Board of Directors; and said _____ and _____ acknowledged said instrument to be the free act and deed of said corporation.

Notary Public

APPLICATION FOR CONCRETE PERMIT

CITY OF WINONA – ENGINEERING DEPARTMENT
207 Lafayette Street, PO Box 378, Winona MN 55987
(507) 457-8269 (507) 452-1239 Fax
Email: mmarxhausen@winonamn.gov

***This application must be approved by the Engineering Office
and the permit received before work begins.***

Applicant _____ Date: _____
(City of Winona Licensed Concrete Contractor)

Property Address _____ Property Owner _____

SIDEWALK - \$10.00

- New Construction
- Replace
- Replace - Sidewalk Project
- Repair
- Other

DRIVEWAY APPROACH - \$10.00

- New Construction
- Replace
- Replace - Sidewalk Project
- Repair
- Other

PAVEMENT PATCH

- New Construction
- Utility Repair/Replacement
- Other

HANDICAP RAMP - \$10.00

- New Construction
- Replace
- Replace - Sidewalk Project
- Repair
- Other

CURB & GUTTER - \$10.00

- New Construction - Including New Curb Cut
- Replace
- Replace - Sidewalk Project
- Repair
- Other

DELAY PENALTY FEES

- Delay Penalty -1st Offense - \$50
- Delay Penalty -2nd Offense \$300

Additional Information: (New Construction for Driveway Approach, Curb & Gutter only)

Rental Property: Yes No Estimated Start Date: _____

Proposed driveway approach is needed for: _____

Requirements:

1. No work under this permit application is to be started until application is approved and the permit is issued.
2. Concrete construction within the street R.O.W. is governed by Chapter 25 of the City of Winona. Work being done in the right-of-way is to be done in strict conformity with all City ordinances and under the control and supervision of the City Engineer or his designee.
3. In requesting this permit, it is understood that it is the Contractor's responsibility to locate the existing utilities. The Contractor shall call Gopher State One-Call at **1-800-252-1166** for underground location. A 48 hours' notice is required by Gopher State.
4. It is further understood that the City is not responsible for their exact location.

Permit No. Permit Cost

Sidewalk or Ramp	\$	Receipt No.
Driveway Approach	\$	Receipt No.
Curb & Gutter	\$	Receipt No.
*Delay Penalty	\$	(Master Card or Visa Card only)

Total Charges: \$ _____

Cash Check Credit Card

Approved by: _____
Engineering Department

*Delay penalty of \$50 will be charged for doing work without a permit. The penalty is \$300 for a 2nd offense.

Application for Right-of-Way Excavation Permit

City of Winona – Engineering Department

(507) 457-8269 (507) 452-1239 Fax

Estimated Start Date:

Contractor/Applicant: _____

Project #: _____

Property Address: _____

Property Owner: _____

Work is being subcontracted: No Yes If yes, name of subcontractor: _____

FACILITIES INFORMATION				
<input type="checkbox"/> Cable TV <input type="checkbox"/> Cooling <input type="checkbox"/> Telecomm. <input type="checkbox"/> Traffic <input type="checkbox"/> Gas <input type="checkbox"/> Fiber <input type="checkbox"/> Electrical Other: _____	Conduit (Size & Kind): _____ Cable (Size & Kind): _____			
	Purpose of Construction		Type of Construction	
	<input type="checkbox"/> New	<input type="checkbox"/> Replacement	<input type="checkbox"/> Trench	<input type="checkbox"/> Plow
	<input type="checkbox"/> Repair	<input type="checkbox"/> Relocate	<input type="checkbox"/> Aerial	<input type="checkbox"/> Bore
	<input type="checkbox"/> Abandon	<input type="checkbox"/> City Project	<input type="checkbox"/> Hole	<input type="checkbox"/> Chamber
Excavation <u>Hole:</u> Length _____ Width _____ <u>Trench:</u> Feet in City ROW _____ <u>Boring:</u> Feet in City ROW _____	R.O. W. Used <input type="checkbox"/> Blvd. <input type="checkbox"/> Sidewalk <input type="checkbox"/> Driving Lane <input type="checkbox"/> Parking Lane	Type of Material <input type="checkbox"/> Grass <input type="checkbox"/> Concrete <input type="checkbox"/> Bituminous <input type="checkbox"/> Gravel	Structures <input type="checkbox"/> Curb & Gutter <input type="checkbox"/> Sidewalk <input type="checkbox"/> Signals	Shoulders <input type="checkbox"/> Bituminous <input type="checkbox"/> Gravel <input type="checkbox"/> Road Signs
REQUIREMENTS: <ol style="list-style-type: none"> 1. No work under this application is to be started until application is approved and the permit is issued. 2. Excavations within the street ROW are governed by Chapter 66 "Right-of-Way Management" of the City of Winona. Work being done in right-of-way for sewer, water, street openings and alleys, is to be done in strict conformity with all City ordinances and under the control and supervision of the City Engineer or his designee. 3. In requesting this permit, it is understood that it is the contractor's responsibility to locate the existing utilities. It is further understood that the City is not responsible for their exact location. 		PERMIT FEES: Excavation Hole \$90.00 Trench \$65.00 Boring \$30 per 100 lineal feet plus hole fee Permit Extension Fee \$30.00 Delay Penalty – Up to 3 days late \$50.00 Each day thereafter \$10.00		
Applicant's Signature: _____		Date: _____		
----- (to be completed by Engineering personnel) -----				

Permit No.: _____

Cost of Permit: _____

Receipt: _____

Pynt: Cash Check Credit or Debit Card

Engineering Approval: Yes No

Approved by: _____

APPLICATION FOR SEWER, WATER AND/OR RIGHT-OF-WAY PERMIT

CITY OF WINONA – ENGINEERING DEPARTMENT

207 Lafayette Street, PO Box 378, Winona MN 55987

Office: (507) 457-8269 Fax: (507) 452-1239 Email: mmarxhausen@winonamn.gov

This application must be filed with the Engineering Office and the permit received by the applicant before work begins.

Applicant _____ Start of Work Date _____

Property Owner _____ Completion of Work Date _____

Property Address _____ ***(A detailed location is required if property address is unknown)*

**Location of work being done _____

FOR: SEWER CONNECTION WATER CONNECTION STREET OPENING FOR: _____

Class of Work	Type of Permit	Location	Size & Type of New Material
<input type="checkbox"/> New	<input type="checkbox"/> Sanitary Sewer	<input type="checkbox"/> From Main to Building	<input type="checkbox"/> " Plastic Pipe Sewer Service
<input type="checkbox"/> Replace	<input type="checkbox"/> Storm Sewer	<input type="checkbox"/> From Main to Blvd.	<input type="checkbox"/> " Cast Iron Sewer Service
<input type="checkbox"/> Repair	<input type="checkbox"/> Water Service	<input type="checkbox"/> From Blvd to Building	<input type="checkbox"/> " Clay Sewer Service
<input type="checkbox"/> Shut Off	<input type="checkbox"/> Right-of-Way	<input type="checkbox"/> In Alley	<input type="checkbox"/> " Sub-Drain Service
	<input type="checkbox"/> Blacktop Surface	<input type="checkbox"/> In Blvd.	<input type="checkbox"/> " Storm Drain Service
	<input type="checkbox"/> Concrete Surface	<input type="checkbox"/> In Street	<input type="checkbox"/> " Copper Water Service
	<input type="checkbox"/> Other (specify)	<input type="checkbox"/> Other (specify)	<input type="checkbox"/> " Pex Water Service
			<input type="checkbox"/> " Ductile Iron Water Service

Specify All Work That Will Be Done Under This Application: _____

Requirements:

1. No work under this application is to be started until application is approved and the permit is issued.
2. Excavations within the street R.O.W. are governed by Chapter 66 "Right-of-Way Management" of the City of Winona. Work being done in right-of-way for sewer, water, street openings and alleys, is to be done in strict conformity with all City ordinances and under the control and supervision of the City Engineer or his designee.
3. It is understood that all work performed for sewer and/or water utilities will be done in accordance with City requirements. As applicant, I will assure the City of Winona that the contractor performing the work holds a current City of Winona Drain Layer's License and a State of Minnesota Master's Plumbers License.
4. The location of existing sewer and water service connections, watermain, sanitary sewer or storm sewer supplied by the City of Winona Engineering Department is provided from the information available. However, in requesting this permit, it is understood that it is the contractor's responsibility to locate the existing utilities. It is further understood that the City is not responsible for their exact location.

Contractor or Authorized Signature

- IMPORTANT -

The contractor shall call Gopher State One-Call at **1-800-252-1166** for underground location. A 48 hours' notice is required by Gopher State. Contractors must call the Engineering Department at **457-8269** for inspection at least 2 hours prior to the time of inspection.

(to be completed by Engineering personnel)

<u>Permit No.</u>	<u>Permit Cost</u>	<u>Receipt#</u>
Right-of-Way _____	\$ _____	_____
Water Service _____	\$ _____	_____
Sanitary Sewer _____	\$ _____	_____
Storm Sewer _____	\$ _____	_____

- PERMIT FEES -

<u>Sewer & Water:</u>	
Water, Sanitary or Storm Sewer	\$35.00
<u>Right-of-Way:</u>	
Excavation Hole	\$90.00
Emergency Hole	\$45.00
Trench -	\$65.00
Boring.....\$30.00 per 100 lineal feet plus hole fee	
Delay Penalty – Up to 3 days late	\$50.00
Each day thereafter.....	\$10.00

Note: Non-emergency work done in the City right-of-way without a permit, will result in a double permit fee.

(Master Card or Visa Only)

Total Charges: \$ _____

Payment: _____ Cash _____ Check _____ Credit Card/Debit Card