

Application to Designate an ATV Route/Crossing On the Adams County Trunk Highway System

Permit Number _____

On County Trunk Highway _____ located/starting at a point _____ miles (North-South-East-West) of the intersection with _____, in Section # _____, Town _____ North, Range _____ East, Adams County, and then proceeding to a point _____ miles (North-South-East-West) of the intersection with _____, in Section # _____, Town _____ North, Range _____ East, Adams County,

Requested Construction Start Date _____

Approximate Construction Completion Date _____

In as much as Chapter 86.07(2) of the Statutes states that "No person shall make any excavation of fill or install any culvert ... in any highway ... without a permit therefore from the highway authority maintaining the highway..." the undersigned requests a permit for the purpose of installing:

ATV Crossing

ATV Route

Before the Adams County Highway Commission takes any action on this application, a representative of the Adams County Highway Commission will make an investigation and field inspection. All applicants are subject to the guidelines set in the "Adams County ATV HIGHWAY CROSSING/ROUTE ORDINANCE." (Established December 21st 2004)

I, the undersigned, understand the provisions contained in the Adams County ATV HIGHWAY CROSSING/ROUTE ORDINANCE and that I will flag the proposed route/crossing.

Name _____
(Name of Organization or Municipality)

Address _____
(Street)

(City, State, and Zip)

Signed _____
Permittee's Representative

Phone _____

Attach a statement as to why the CTH segment described above should be designated as an ATV Route or have a crossing.

IMPORTANT: Please attach statements from landowners denying access for trails if lack of access is a reason for requesting route designation.

For Highway Department Use

Received \$150.00 application fee from _____ Date: _____

Culvert(s) Required: Yes No Culvert Size and Type: _____

Any additional requirements will be set forth in attachments to this form.

Approved by Adams County Highway Committee:

Dated: _____