

## ATV Route Designation Application for the Public Roadways

**Application Fee: \$35.00**

<b>ALL APPLICATIONS</b>	Municipality _____ Date of Application _____ Contact Name _____ Contact Phone _____ Street Address _____ City, State, Zip _____ Email Address _____
<b>** NEW APPLICATIONS</b>	1) Attach a map of the requested Route. Indicate the trail-ends and approved municipal routes to be connected. Additionally, highlight and list businesses that will be served. <span style="float: right;">Attached? <input type="checkbox"/></span>
	2) Attach a list of all property owners on the proposed route and the notice mailed to them. <span style="float: right;"><input type="checkbox"/></span>
	3) Indicate the date that the Town Meeting was held by the affected jurisdiction to discuss the route. <span style="float: right;">_____</span>
	4) Attach the municipal ordinance authorizing the route. <span style="float: right;"><input type="checkbox"/></span>
	Route on _____ County Trunk _____ Length of Route _____ Miles Starting _____ GPS _____ Ending _____ GPS _____ Route _____ Justification _____ _____ _____
Are there any restrictions recommended by the jurisdiction? (i.e. speed limit, hours of operations, open/close dates?) _____ _____ _____	
<b>ALL APPS</b>	_____ <b>Applicant Signature (Municipality)</b> <span style="float: right;">_____</span> <span style="float: right;"><b>Date</b></span>

**FOR EAU CLAIRE HIGHWAY PERSONNEL USE ONLY**

Comments/restrictions applying to this application: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**SIGNAGE MUST MEET ALL APPLICABLE MUTCD STANDARDS; STATUTES 23.33 (8) (e) AND NR64.12 (7)**

# of Signs Needed:      ATV                                  Route  
                                 Silhouette      \_\_\_\_\_      Arrows      \_\_\_\_\_      Start/End      \_\_\_\_\_  
Purchase \$ \_\_\_\_\_      Installation \$ \_\_\_\_\_      Annual Mainten. \$ \_\_\_\_\_      Total \$ \_\_\_\_\_

Reviewed with Applicant on \_\_\_\_\_ By \_\_\_\_\_

Highway/Street Dep't: Approved                                   Disapproved       By \_\_\_\_\_

Law Enforcement:      Approved                                   Disapproved       By \_\_\_\_\_

Highway Committee: Approved                                   Denied       Date \_\_\_\_\_

Were there any incidents in the prior year?      Yes       No       Count \_\_\_\_\_

Were there significant complaints?      Yes       No       Count \_\_\_\_\_

Comments: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**\*\*NEW APPLICATIONS**

**\*\*All ordinances granting road routes must be on file with the DNR**