



Highway Department

Highway Facility
300 Oak Ridge Parkway | Baldwin, WI 54002
Telephone: 715-245-4200 | Fax: 715-245-4199
www.sccwi.gov

ATV Route Designation Application for the Public Roadways

ALL APPLICATIONS	Municipality _____ Date of Application _____
	Contact Name _____ Phone _____
	Street Address _____
	City/State/Zip _____
	Email _____
NEW APPLICATIONS	Route on County Trunk _____ Length of Route _____ Miles
	Starting _____
	Ending _____
	<u>Route Justification</u>
<u>Are there any restrictions recommended by the jurisdiction? (i.e. speed limit, hours of operations, open/close dates)</u>	

Applicant Signature (Municipality) _____ Date _____	

FOR ST. CROIX COUNTY HIGHWAY PERSONNEL USE ONLY

NEW APPLICATIONS

Truck Route _____ ADT _____ Crash Rate _____

Functional Classification _____

Environmental Constraints _____

Additional Information _____

Comments/restrictions applying to this application:

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

Were there any significant complaints? Yes No Count _____

Comments:

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

Number of Signs Needed _____

Purchase \$ _____ Installation \$ _____ Annual Maintenance \$ _____

Total \$ _____

Reviewed with Applicant on _____ by _____

Highway/Street Department Approved Denied by _____

Comments:

Law Enforcement Approved Denied by _____

Comments:

Highway Committee Approved Denied Date _____

Comments:

County Board Approved Denied Date _____

Comments: