

Engineer Signature:

Blasting/Rock Crushing Permit Application

242 Fredonia Ave Fredonia, Wisconsin 53021 (262) 483-0275 https://www.fredoniawi.gov/

Date	
Received	
Permit	
Number	
Total Fee	\$50.00 Annually
Expiration of	
Permit	

Owner's Information

Owner's Name																		
Site Address																		
City, State, Zip Code																		
Phone Number																		
Contractor's Information																		
Contractor's Name																		
Address																		
Phone Number																		
Email																		
License/Certification Number	er																	
Project Information																		
Description of Project:																		
Methods of Screening From A	Adjace	nt Proper	ties:															
Hours of Operation:																		
Hours of Blasting/ Operation	n of Roc	k Crushe	r:															
Dust and Noise Control Meas	asures:																	
Location and Height of Stock	k Piles:																	
Water Supply:																		
Drainage Course:																		
 Each application for the of Fredonia as a party more than one person All requests for renew must comply with all replan of operation mus 	y insure on cause wals of _l I require	d in the and by the location of the distribution of the distributi	mount blasting nust be \$ 187-3	of \$500 made a 3.	0,000 at leas	for da	mage	to pro	opert	y and	\$1	L,0	00,0	000 f	or in	jury t	0	
Applicant Signature:										Date:	; [

Date: