



Application Fee: \_\_\_\_\_

**Public Right of Way Application**

Applicant(s) Name: \_\_\_\_\_

Business Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Business Address: \_\_\_\_\_

Business Hours: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_

Describe the items you wish to display:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Display timeframe (dates & time):

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Please attach a sketch showing the placement of all items in the PROW as they relate to the street, building, hydrants, utility poles, etc.

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of MS PROW

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of City Engineer

\_\_\_\_\_  
Date

**\*Complete applications and deposits are to be delivered to Main Street Marshfield, Inc.**

**Main Street Marshfield, Inc.  
222 South Central Avenue, Suite 205  
Marshfield, WI 54449  
(715) 387-3299**