



Application  
For  
Permit to Occupy  
Public Right of Way

Department of Public Works

Office Use Only

Date Received: \_\_\_\_\_  
Application #: \_\_\_\_\_  
Customer #: \_\_\_\_\_  
Permit #: \_\_\_\_\_  
Date Issued: \_\_\_\_\_

**Applicant Information**

\_\_\_\_ Property Owner

☒ Contractor

Name (print) CHRIS LEAPLEY

Company: QUASIUS.

Address: 1202A N. 8<sup>TH</sup> ST.

Contact Phone: 920-946-2103

SHEBOYGAN, WI 53082

Email: CLEAPLEY@QUASIUS.COM

**Purpose & Location**

Type of Equipment: \_\_\_\_ Dumpster, \_\_\_\_ POD, \_\_\_\_ Work Trailer, Other Temp. CONST. FENCE

Property Address: 826 N. 8<sup>TH</sup> ST, SHEBOYGAN, WI

Equipment Owner: QUASIUS

Location on Right of Way: SOUTHWEST CORNER of NIAURA AVE & N. 8<sup>TH</sup> ST.

Start Date: JUNE 1, 2025 Duration, In Days 14 MONTHS (2025 1)  
(Increments of 15)

**Permit Fees**

\$25.00 for each increment of 15 days.

**Terms & Conditions**

It is expressly provided that the person for whose use or benefit the permit is issued, is not authorized to occupy the stated location except in conformity to the provisions of Chapter 110, Section 110, 101-110, of the Municipal Code of the City of Sheboygan, and shall be liable for any and all damages that may occur or result in consequence of the obstruction, or occupancy of stated location, and shall put up and maintain such barriers and lights as will effectually prevent the happening of any accident in consequence of such occupancy, use, or excavation. Any violation of the terms or limits of time given in this permit shall be subject to the penalties provided by the ordinances of the city, the permit being void except for the time and purpose named.

The equipment will not be delivered until the permit is issued and paid at the Department of Public Works Office, 2026 New Jersey Avenue, Sheboygan. All time extensions must be paid for in advance. No refunds or credit will be issued for unused time.

Equipment owner or designee shall notify Public Works Office within 24 hours following the removal of equipment.

Please sign to acknowledge the Terms and Conditions set forth.

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

Date: 5/13/25