



**TOWN OF WINDSOR
ENGINEERING DEPARTMENT**

Permit No. _____

ENCROACHMENT PERMIT

Date: _____

Fee: _____

Receipt No.: _____

APPLICANT INFORMATION

NAME:

ADDRESS:

TELEPHONE NUMBER:

CONTACT PERSON:

LOCATION OF ENCROACHMENT, OBSTRUCTION OR STRUCTURE: _____

PURPOSE OF ENCROACHMENT, OBSTRUCTION OR STRUCTURE: _____

The applicant agrees to abide by the provisions of Chapter 11, Article III of the Windsor Municipal Code.

Signature of Applicant

Date

Approved By: _____

Engineering Department

Date