

## 915.5 PRIVATE ACCESS – LAND USE LICENSE /PERMIT AND AGREEMENT

Name:

Address:

City/State:

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This license/permit is issued for the improvement and use of a roadway across the county owned forestlands for access to privately owned property only. The County continues full ownership of the roadway, however, it shall not be liable for maintenance or upkeep of the roadway.

Location/Land Description:

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1. The permit is non-transferable.
  2. The County reserves the right to use the roadway for its legitimate business purposes, including rights of public access along the roadway, and to assign rights of use as it sees fit. No restrictive signs, gates or barriers may be placed on County land by the permittee.
  3. The permit is valid for the existing road in its existing condition. Any construction or reconstruction, widening or improvements must be approved at least 30 days in advance by Forestry and Parks Committee. Permittee is responsible for all costs of construction and for any permits required to do the construction.
  4. The Permittee agrees to indemnify the County and to save the County harmless in regard to any and all liability that may arise as a result of the construction, maintenance, or use of said roadway.
  5. The width of the right of way across said County lands shall be limited to a width of two rods unless an exception is allowed by the committee and shall be installed in a location agreeable to and/or designated by the County.
  6. The County reserved the right to cancel this permit with cause. Cause can include, but is not limited to, such things as violation of permit terms, misuse of County lands, damage to County property, and noncompliance with County ordinances.

7. Upon expiration or cancellation of this permit, the Permittee agrees to restore the roadway to a condition equal to or better than that at the time the permit was issued.
8. The Permittee is responsible for all permits that are required to connect the roadway to a town road, county or state highway.
9. Should the general intended use, for which this permit was granted, be changed or altered, this permit shall be automatically null and void.
10. All utilities above or below ground are prohibited with the exception of municipalities or other government bodies.

IN WITNESS WHEREOF, I have here undersigned my hand and seal this \_\_\_\_ day of \_\_\_\_\_, 2024.

\_\_\_\_\_  
Cindy Altman, Jackson County Clerk

STATE OF WISCONSIN)  
COUNTY OF JACKSON)

Personally came before me this \_\_\_\_\_ day of \_\_\_\_\_, 2024, the above named Cindy Altman, Jackson County Clerk, to me known to be the person who executed the foregoing instrument and acknowledge the same.

\_\_\_\_\_  
Notary Public, Jackson County, WI  
My commission expires \_\_\_\_\_

IN WITNESS WHEREOF, I have here undersigned my hand and seal this \_\_\_\_ day of \_\_\_\_\_, 2024.

\_\_\_\_\_  
STATE OF WISCONSIN)  
COUNTY OF JACKSON)

Personally came before me this \_\_\_\_\_ day of \_\_\_\_\_, 2024, the above named \_\_\_\_\_, to me known to be the person who executed the foregoing instrument and acknowledge the same.

\_\_\_\_\_  
Notary Public, Jackson County, WI  
My commission expires \_\_\_\_\_

Application Fee: \$25.00

LAND TRANSACTION APPLICATION

JACKSON COUNTY FORESTRY AND PARKS DEPARTMENT

1. **Type of request (mark one)**

- ☐ Driveway License Permit  
(Minimum \$500.00 fee – based on \$500 per acre)
- ☐ Purchase of County Land
- ☐ Trade for County Land
- ☐ Request for special use permit or agreement

2. **Applicant Information**

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

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

\_\_\_\_\_

Phone: \_\_\_\_\_

3. **Brief description of your proposal**

4. **Location (Legal description or map)**

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

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5. **Purpose and Need (Include history and background of proposal)**
6. **Physical changes proposed (land clearing, ditching, earth moving, etc.)**
7. **Construction plans (buildings, sanitary systems, wells, etc.)**
8. **Alternatives considered (Other private lands, other methods, etc.)**
9. **Required Permits (List any permits needed for this proposal)**

I hereby certify that the information I have provided is true to the best of my knowledge.

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature