## La Crosse County Highway Department ATV/UTV Route Application

Section 1 To be completed by A	pplicant					
Name of Municipality or Sponsoring Mailing Ad						
Represer						
Mailing Ad	Juress:					
Ph (Note: Only La Crosse County Towns, Muni	none #:	I ATV/UTV Clubs	located in La Cro	osse County are	e eligible to ap	ply for Routes)
Identification of Route Being Request		I			I	<u> </u>
County Poods	Route 1	Route 2	Route 3	Route 4	Route 5	Route 6
County Road: From:						
To:						
Total Miles:						
Located in What Town?		kttach a map th				
Please describe how this, or these, pro destination, ending, and where connec	•		_		st also show	a logical
What amenities along the proposed ro would be affected)	ute(s) would	l benefit both r	iders and busi	nesses? (Pleas	se list the bus	inesses that
Does your organization accept respons  If no, the application will not	•	e initial cost of	signage?	yes no		
Does your organization accept respons	ibility for an	y additional pu	blic	ves no		

## Section 2 To be completed by the La Crosse County Highway Department

Route	Paser Rating	Speed Limit	Pop. Dens.	ADT	Terrain
1.					
2.					
3.					
4.					
5.					
6.					

How many accidents have occurred or bee	n reported on these proposed routes in the past 5 years?
Will the terrain impact the ability of vehicle	es to see each other and are there appropriate passing lanes?
If the population density or ADT on any particle been notified? How many have expressed of	rts of these routes exceeds the limit, have those residents along the routes concerns?
	nicipality and the Highway Department will post any information droutes on their web sites in order to keep residents informed.
Reviews/Approvals:	
Municipalities Affected:	
Approved on:	
Affected County Board Supervisors:	
Reviewed on:	
Local Town/Municipality	
Law Enforcement:	
Reviewed by/on:	
Comments/Concerns/Questions:	
La Crosse County Sheriff's Department:	
Reviewed by/on (date):	
Comments/Concerns/Questions:	
-	

## Section 3 La Crosse County Public Works and Infrastructure Committee

Date to be Reviewed:				
Comments/Additional Information Reques	sted			
_				
Approved on:				
Vote:				
	For	Against	Abstain	Excused Absent
Not Approved:				