

Mary Ann Harwood - Commission Chair  
 Terry Tomsheck - Commissioner  
 Terry Kimmert - Commissioner  
 Merle Raph - County Attorney  
 Dan B. Whitted - Coroner  
 Tyler Padilla - Sheriff



Debra Munson - Clerk of Court  
 Treva Nelson - Clerk & Recorder/  
 Election Administrator  
 Donna Whitt - Justice of the Peace  
 Boyd Jackson - Treasurer/Assessor/  
 Superintendent of Schools  
 Phyllis Robertson - Public Administrator

226 1<sup>ST</sup> Street South  
 Toole County Courthouse, Shelby, MT 59474  
 406-424-8300 www.toolecountymt.gov

**PERMISSION TO CROSS TOOLE COUNTY ROADS**

The Board of Toole County Commissioners hereby grants permission to (name of entity) \_\_\_\_\_ to cross the county road described as follows: (section, township, range; please attach a map) \_\_\_\_\_  
 Width of ditch \_\_\_\_\_ Minimum depth of ditch \_\_\_\_\_  
 Size of line \_\_\_\_\_

**All lines** must be buried a minimum depth of **six (6) feet**, ditch included, and marked on one end at the edge of right of way signifying type of line buried. All non-metal lines must be marked for location with a metal strip buried 18 inches above the line for the full width of the road crossing.

- If ditched, ditch must be filled and compacted with a hand tamper every six (6) inches from the bottom up. If it is a gravel road, the gravel must be replaced. Settling and repair of crossings shall be the contractor's responsibility for two (2) years.
- Work must be done in daylight hours, and as speedily as possible so as not to inconvenience the motorist any more than necessary. Construction signs must be properly displayed to assure safety. If traffic is to be delayed more than \_\_\_\_\_ hours, a detour must be provided.
- The applicant and the contractor must have **proof of insurance in the Commissioners' office** before this application is valid.

**APPLICANT:** Hereby agrees to this contract.

**GPS Location:**

\_\_\_\_\_  
 (Name and Title)

\_\_\_\_\_  
 (Date)

N \_\_\_\_\_

W \_\_\_\_\_

TOOLE COUNTY ROAD SUPERVISOR

\_\_\_\_\_

**BOARD OF TOOLE COUNTY COMMISSIONERS**

Date: \_\_\_\_\_

\_\_\_\_\_  
 Toole County Commissioner

**FINAL INSPECTION**

TOOLE COUNTY ROAD SUPERVISOR

\_\_\_\_\_

\_\_\_\_\_  
 (Date)

Prior Permit Approval Fee: **FREE**

**Failure to Obtain Permit Prior to Work Fee: \$250**