



# VILAS COUNTY LAND AND WATER CONSERVATION DEPARTMENT



330 COURT STREET  
EAGLE RIVER, WI 54521  
715/479-3682

## Access Permission Form

I, \_\_\_\_\_, hereby give my permission to the Vilas County Land and Water Conservation Department (VCLWCD) and its employees, duly authorized representatives, agents and contractors, to enter upon and have access at reasonable times to the following described property, located in the Town of \_\_\_\_\_, Vilas County, Wisconsin:

Physical Address of property: \_\_\_\_\_

Legal Description of property: \_\_\_\_\_

for the following purposes:

1. Installation
2. Inspection
3. Compliance Checks up to Ten (10) years
4. \_\_\_\_\_

The permission that is granted herein shall remain in effect for 10 years from the date of signature below.

In granting access permission herein, I represent that I am the owner of the property subject to said access permission and have identified the proper location of the property lines. I hereby agree to hold harmless, defend, and indemnify Vilas County government, VCLWCD and its officers, employees, agents, volunteers and sponsors for any claim of trespass to property in relation to the County's activities associated with this permission.

IN WITNESS WHEREOF:

\_\_\_\_\_  
Signature of Property Owner

\_\_\_\_\_  
Date

\_\_\_\_\_  
Mailing Address of Property Owner

\_\_\_\_\_  
Telephone