## **CERTIFICATE OF RIGHT OF WAY**

(Excludes railroad interests)

Date

RE1899 03/28/2014 (Replaces RE5005)				DDE format prior to another via Equiparit	
To: Director, Bureau of Technical Services -	Roal Estato			o a PDF format prior to sending via Esubmit.	
Hill Farms Bldg/Rm 501 - Madison		From: SW Region; Technical Svcs		Date: 1/7/19	
Construction project number	Federal aid	project number	R/W	project number	
1009-30-16	-		-		
Highway			Letting date		
Var Hwy			5/14/19		
Title and limits		County			
Sign Bridge Replacement/Regionwide Va		Dane			
Type of work		Begin station		End station	
Repair and Maintenance of sign structure	es	n/a		n/a	
Encroachments still to be removed					
None Yes, list parcel #(s), station(s), exp	plain items, w	ho will remove, estimated removal da	ate, etc.	:	
Encroachments to be left in place by revocable pe	ermit				
None Yes, list parcel #(s), station(s), exp		с.:			
	,				
Hazardous waste					
		nion actimated removal data ata .			
None 🗌 Yes, list parcel #(s), station(s), explain remedy plan, estimated removal date, etc.:					
List right of way parcels and interests required for					
None 🗌 Yes, provide parcels #(s) and type of interest, to include construction permits:					
For WisDOT Regional Design Authorization Use Only					
Note: Railroad land interests are not a part of this certification.					
No new right of way is required; and, we certify the right of way status as #1, pursuant to 23 CFR 635.309 and other federal regulation					
as appropriate.					
Yes, new right of way is required. (If checked, forward to regional Technical Services – Real Estate.)					
		Kyle Treml		1/7/19	

Kyle	Treml		
Regional Design Representative			
(Only Wi	sDOT has authorization approval)		

For WisDOT Regional Real Estate Authorization Use Only					
If new R/W is required:          All parcels are acquired.         Parcels not yet acquired.         If new R/W is required.         If new R/W is r					
Relocation None Yes, provide parcel #(s), relocation date(s), anticipated, delays, etc.:	Structure Removal None Yes, provide type(s), removal date(s), by whom:				
On behalf of the acquiring agency State, County, City, Village, Town, Other:, and pursuant to 23 CFR 635.309 and other federal regulation as appropriate, we certify the right of way status as: 1, 2, 3.					
5	nal Real Estate Representative Date				

Include additional information and attach additional pages, if necessary.