

TOWN OF
ST. JOSEPH
ST. CROIX COUNTY, WISCONSIN

1337 County Road V
Hudson, WI 54016-6712
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www.townofstjoseph.com
email@townofstjoseph.com

Culvert Order Form

Name _____

Billing Address _____

City _____ State _____ Zip _____

Phone _____

Email _____

Order Date _____

CIRCLE ONE: **DELIVERY** OR **PICKUP**

Delivery Address _____

City _____ State **WI** Zip _____

Requested Delivery Date _____ (depends on County availability)

Specifications:

Type: Galvanized ONLY

Endwalls: 2 required (one for each end)

Width _____ (as discussed with Deputy Zoning Administrator)

Length _____ (width of driveway)

Date received by Clerk's Office _____

Date ordered with St Croix County _____

Expected Delivery Date _____