

Date _____

DRIVEWAY PERMIT APPLICATION.

COMMERCIAL _____ RESIDENTIAL _____ FARM _____

Name _____

Current mailing address. _____

City and Zip Code _____

Daytime Phone _____ Cell Phone _____

Email Address _____

Desired Width of Driving surface _____

6-1 Sloped Safety ends are required unless your permit states otherwise.

Type of Culvert pipe- check one- Concrete _____ Galvanized Metal _____

Highway of driveway location _____

Address of driveway location _____

Location of driveway North ____ South ____ East ____ West ____ ROW of Roadway.

Driveway must be staked or flagged

Please give nearby roadway where your driveway is located.

All driveways must have a Land Plat and a 911 address.

ALL COMMERCIAL DRIVEWAYS HAVE TO BE CONCRETED.

Please allow 15 days for processing of your driveway permit. Once our inspector completes your permit, he will contact you by phone or email to come to the office for your signature. Your permit will then be given to the Area Engineer for his approval and signature. Once approved, you will be called to pick up your permit to begin installation. A completed signed permit with both, your signature and the Area Engineer's signature must be in hand before any work can begin. The signed original or a copy must be onsite during installation of your driveway.

THIS INFORMATION PAGE IS NOT YOUR PERMIT TO CONSTRUCT YOUR DRIVEWAY.