

## CULVERT/DRIVEWAY PERMIT APPLICATION

Install Access Driveway to a Town Road

### APPLICANT/COMPANY INFORMATION

Applicant/Company Name:

Current address:

City: State: ZIP Code:

Phone: Email:

Plans prepared by: Phone:

### LOCATION INFORMATION

Name of Town Road(s):

Located on North South East West side of the town road (circle one).

Please set out a stake, flag or some other identifying marker on the center of the proposed installation. A diagram may be attached to this application.

### DESCRIPTION OF PROPOSED WORK

Number of driveways: Width of top of driveway feet

**Driveway Type:** ☐ Rural (Culvert) ☐ Urban (Curb Cut) ☐ Existing Driveway Extension

**Driveway Surface:** ☐ Gravel ☐ Asphalt ☐ Concrete (Required for Urban Type)

**Proposed Land Use:** ☐ Residential ☐ Farm ☐ Field Entrance

☐ Duplex ☐ Commercial (type) \_\_\_\_\_

### ALL OTHER INFORMATION

Name of Utility Representative Responsible for Construction: Phone:

Estimated Starting Date: Estimated Completion Date:

### SIGNATURES

The undersigned and designated applicant requests permission to construct the driveway(s) hereinafter described on Town right-of-way, and , in consideration of being granted permission, as evidenced by the approval of the authorized representative of the Town, binds and obligates himself to construct the driveway(s) in accordance with the description contained herein and sketches, if any, attached hereto, and to abide by the general requirements and location design and construction requirements set forth in the Town of Lawrence Zoning Ordinance.

**Signature of applicant:**

**Date:**

## FOR OFFICE USE ONLY

**Driveway Type:** ☐ Permanent ☐ Temporary (Expiration Date \_\_\_\_\_)  
**Driveway Surface:** ☐ Gravel ☐ Asphalt ☐ Concrete (Required for Urban Type)

### ISSUING JURISDICTION

The foregoing application is hereby approved and permit issued by the Permit Authority subject to full compliance by the Applicant with all provisions and conditions in the Utility Accommodation Policy of the above-named Town including the Indemnification as included in 96.03 of the WCHA Utility Accommodation Policy in effect on the date of this application.

Other Permit Information Attached: Yes / No

#### FEES:

Fee Received: \$ \_\_\_\_\_  
Check #: \_\_\_\_\_  
Date Issued: \_\_\_\_\_  
Road Project #: \_\_\_\_\_  
Permit #: \_\_\_\_\_

#### PERMIT ISSUED BY:

Name: \_\_\_\_\_ Title: \_\_\_\_\_  
Date: \_\_\_\_\_ Telephone: \_\_\_\_\_