

APPLICATION TO CONSTRUCT OR REPAIR OF
DRIVEWAYS ON THE PUBLIC STREETS

Applicant _____

Date _____

Address _____

Phone number _____

Type of Construction _____

Zoning District _____

Lot Number _____

NOTE: PLEASE MAKE A SKETCH ON BACK OF APPLICATION
SHOWING THE LOCATION OF ACCESS IN REFERENCE
TO PROPERTY AND STREETS.

Lot Dimensions

Depth _____

Width _____

Square Feet _____

Driveway Dimensions

Width (10' Minimum) _____

Length (from roadway
to property line) _____

Depth (6" minimum) _____

Type of paving * _____

Fee \$ 5.00 _____

*City right-of-way must be either asphalt or paving

MUST BE INSPECTED WITHIN 30 DAYS AFTER COMPLETION

PERMIT WILL EXPIRE SIX MONTHS FROM THE DATE OF ISSUANCE IF NOT CONSTRUCTED WITHIN THAT TIME.

THE GRADE OF ANY SIDEWALK SHALL NOT BE ALTERED BY THE WORK DONE. THE DRIVEWAY SHALL BE AT THE SAME LEVEL AS ANY EXISTING SIDEWALK.

DATE APPROVED: _____

PERMIT ADMINISTRATOR _____