

Copy to Superintendent:

APPLICATION FOR PRIVATE DRIVEWAY ACCESS

Required: • Copy of plat, C.S.M., or site drawing • One (1) driveway per application SECTION I. Completed by applicant · Proposed location staked in the field Owner Name _____ Date _____ Phone _____ **Address** Email Address of driveway, if different: Along the _____ side of the road County Trunk Highway_____ Select One Describe the approximate location **Type of permit requested:** Single Family or Farm Re-application Width of Frontage _____ Width of driveway requested _____ Note: 16 feet minimum SECTION II. Completed by DPW patrol superintendent Date to Sup: _____ Name of Road: ____ Does another public road border the property? Speed Limit MPH Statutory Does sight distance need verification? Existing ditch line from the centerline ft. Is a culvert pipe required? Type of culvert required: Corrugated Metal, Round Corrugated Metal, Arch Diameter in. Length ft. End walls required? At a distance of ft. from the edge of the road, the finished grade of the driveway shall be at least in. below the edge of the adjacent highway. Patrol Superintendent _____ Date: SECTION III. Completed by DPW-Engineering Services CTH segment Permit No Controlled Access _____ Existing A.D.T. _____ Verified Sight Distance Distance Required _____ min. / desired Actual ____ No Culvert / Culvert installed by owner \$650 Payment Cash Permit Fee: Culvert installed by Waukesha County \$2270 Check # _____ Reviewed by: _____ Date: ____ Date Paid: ____

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