



## APPLICATION FOR PUBLIC ROAD ACCESS

SECTION I	Permit Number:			
name and address			Date:	
			Phone:	
Engineer name and address:				
			Phone:	
County Trunk Highway	Name of su	ıbdivision street		
Location:Quarter	Section	, т	N, RE	
Name of Subdivision:		Nu	mber of Lots	
Width of frontageRoadw	ay widthft. C	urb and Gutter_	Open ditch	
SECTION II To be completed by DPW-E	Engineering Services			
County highway Segment:		s Ex	isting A.D.T	
Does another public road border the	property?	Name of Ro	ad:	
Speed Limit M.P.HStat	I.P.HStatutory		Sight Distance Required	
Verified Sight Distance	Mea	sured: from	( B):	
Intersection type required?		from	( B):	
Is a culvert pipe required?	By-pass lane	required?		
Type of culvert required: Corrugate	ed Metal, Round	Arch Sto	orm Sewer	
Diameter in. L	engthft.	End	walls required?	
Date Application Fee Paid	Amount		Check No	
Date Permit Fee Paid:  mm/dd/yyyy  mm/dd/yyyy	Amount		Check No	
Reviewed by:		Date:	mm/dd/yyyy	
Copy to Superintendent: Rick Gill				