## TOWN of DANVILLE P.O. Box 183

## DANVILLE, VERMONT 05828 Application for Highway Curb Cut/Driveway Permit

Date:	Permit#:	
Applying for:     Temporary	Access Permanent A	Access
Fee \$60.00 attached ☐ Yes	☐ check	□ cash
Property Owner's Name:		Phone #:
Mailing Address:		
E-mail Address:		
Property Owner's Name:		Phone #:
Mailing Address:		
E-Mail Address:		
Applicant's Name (if different):	:	
Mailing Address:		
E-Mail Address:		
E-Mail me correspondence: □	Yes □ No	
Location where proposed work	will be done:	
Parcel ID#:	Town Highway#:	Road Name:
(Attach sketch with dimensions		
Date (s) work to be done:		
Work to be done by:		
Traffic Control required: \( \sum \) \( \text{Y} \)	es ☐ No If yes, describe	how traffic control will be maintained

I have read and understand the <b>HIG</b> l Danville and agree to abide by its co		AY POLICY of the Town of
Property Owner's signature:		
Property Owner's signature:		
Applicant signature (if applicable):		
Received by Town of Danville on: _ of \$60.00.	by	with the fee
Note: Fee includes a \$30.00 recording fee. (	\$15.00 Permit Recording, \$15.00 Cer	tificate of Compliance Recording)
Road Foreman's Comments and Com		
Selectboard Decision:		
The application of	to	install a driveway within the
Town's right-of-way on Town Highv	/ay #	
Town Road name	is hereby:	
☐ Approved with Road Foreman's G	Comments and Conditions Abov	ve
☐ Denied for these reasons:		
	Danville Selectboard Members	:
Date:		