

## **DRIVEWAY/CULVERT APPLICATION**

W2004 County Road S - PO Box 1007 - Freedom, WI 54131 920-788-4548 phone - 920-788-7550 fax

deputyclerk@townoffreedom.org - www.townoffreedom.org

			Т		
OWNER			DATE OF APPLI	CATION	PERMIT No.
MAILING ADDRESS					
PHONE		E-MAIL			
FTIONE		L-WAIL			EE:
TYPE OF INSTALLATION				R	EC #:
Permanent	Temporary			s	taff Initials:
PLEASE SEE PAGE	2 FOR CULVERT ELEV	ATIONS AND E	BENCHMA	RKS	Shaded areas to be completed by Town personnel
LEGAL DESCRIPTION OF PROPERT	Y WHERE CULVERT/ACCESS IS TO BE LOC.	ATED			
ADDRESS	PARCEL/LOT#		SUBDIVIS	ION/CSM #	
IS THE CULVERT LOCAT	TION STAKED OR MARKED?	YES	NO	(PLEASE PROSHOWI	OVIDE MAP NG LOCATION)
DESIRED CULVERT LEN	IGTH:				
PERMIT FEES					
CULVERT/DRIVEWAY PE	RMIT FEE	\$50.00 EACH		X \$50.00 = _	
permission for any work to be OWNER ONLY.  I will comply with the terms as	he submission of this application to performed in street right-of-way and conditions of any permit that may part call 24 HOU PAVEMENT	d, if the permit is appro	oved, it shall be	issued in the nam	e of the CURRENT PROPERTY
PRINT/TYPE FULL NAME					DATE



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## **TOWN STAFF REVIEW/COMMENTS**

ROADWAY AGREEMENT REQUIRED? YES NO						
ROADWAY AGREEMENT EXECUTED? YES	NO N/A					
ACCESS CONTROLLED BY: OUTAGAMIE COUNTY APP	PROVAL N/A					
STATE OF WISCONSIN AF	PROVAL N/A					
SITE PLAN OR SPECIAL EXCEPTION CONFORMANCE/CONE	DITIONS					
CULVERT GRADES MAY BE SET BY CONTRACTOR TO PROVIDE POSITIVE DRAINAGE.	☐ YES ☐ NO (SEE BELOW)					
BENCHMARK ELEVATION BENCHMARK DESCRIPTION:						
*N/W CULVERT INVERT ELEVATION	*S/E CULVERT INVERT ELEVATION					
*NOTE: THE INVERT IS THE BOTTOM INSIDE OF THE PIPE.						
GRADE STAKES:						
N/W STAKE EL. =	S/E STAKE EL					
CUT FEET TO N/W INVERT CUT FEET TO S/E INVERT						
NOTE: FLARED END SECTIONS ARE REQUIRED FOR PERMA	NENT INSTALLATIONS					
ACCESS LOCATION:						
CULVERT LENGTH/ACCESS WIDTH (FEET):	CULVERT DIAMETER (INCHES):					
TEMPORARY PERMIT SHALL EXPIRE ON:	PERMANENT ACCESS:  ☐ YES ☐ NO					
THIS PERMIT IS ISSUED SUBJECT TO THE TERMS AND CONDITION BUT NOT LIMITED TO THE TOWN ORDINANCES AND THE TOWN ORDINANCES AND THE TOWN ORDINANCES AND THE TOWN OR PLEASE CONTACT THE DEPARTMENT OF PUBLIC WORKS WHEN	OF FREEDOM STREET SPECIFICATIONS.					
ISSUED: SIGNATURE OF AUTHORIZED PERMITTING AUTHORITY REPRESENTAT						
ISSUED: SIGNATURE OF AUTHORIZED PERMITTING AUTHORITY REPRESENTAT	TIVE AFTER INSTALLATION DATE					