

Maple Lake Township

INFORMATION NEEDED PRIOR TO INSPECTION

Property Owner: _____

Mailing Address: _____ City, State, Zip: _____

Daytime Telephone Number: _____ Applicant Requests Phone Call: Yes ___ No ___

Road Information: T# _____ Street Name: _____

Side of road driveway to be installed on: N S E W Section _____ Township _____ Range _____
(Circle One)

APPLICATION IS HEREBY MADE TO CONSTRUCT AND THEREAFTER MAINTAIN THE FOLLOWING ENTRANCE TYPE:

Residence ___ Public Street ___ Farm ___ Field ___ Commercial ___

A MAILBOX SUPPORT IS REQUIRED, IF MAIL WILL BE DELIVERED TO THIS LOCATION.
Mailbox support needed? Yes ___ No ___ If yes, contact office for support standards.

A \$25.00 INSPECTION FEE IS DUE AT THE TIME OF APPLYING FOR PERMIT. DATE PAID: _____
(SEE ATTACHED FOR REQUIREMENTS)

FOR DEPARTMENT USE ONLY

SITE INSPECTION DATE: _____

PRICE OF CULVERT: \$ _____

RITE OF WAY WIDTH: _____ (feet from centerline)

PRICE OF BANDS: \$ _____

CULVERT REQUIRED: Dia. _____ Length in feet _____

PRICE OF APRONS: \$ _____

APRONS REQUIRED: Yes ___ No ___ # OF BANDS _____

ENTRANCE WIDTH: _____

SUB-TOTAL: \$ _____

NUMBER OF EXISTING ACCESSES: _____

SALES TAX: \$ _____

RECOMMENDATIONS: _____

DELIVERY: \$ _____
(\$35.00)

APPROVED BY: _____

TOTAL: \$ _____

SPECIAL PROVISIONS ATTACHED? Yes ___ No ___

DATE PAID: _____

As an applicant, I understand that this permit will expire after one year. I shall conform to the recommendations above and to the requirements as stated in the **Maple Lake Township** Driveway Policy, attached. In addition, I shall maintain the entrance and take care of all erosion for two (2) years after installation.

Applicant Signature