ORROCK TOWNSHIP REQUEST FOR DRIVEWAY ESCROW RELEASE

26401 180TH STREET NW FOR OFFICE USE ONLY Request Received by/date / BIG LAKE, MN 55309 Final Inspect by/date _____/___ 763 263 6411 clerk@orrocktownship.com Approved for Release of Escrow by/date **EMAIL** PLEASE PRINT Original Payor ______ Phone _____ Email _____ Person Requesting Escrow Fund Balance (if different than original payor) Name ______ Phone _____ Email _____ Address Project Information Permit number _____ Address _____ Plat: _____ Block: ___ Lot ____ I (we) the undersigned, herewith make application for release of remaining escrow funds for the above named project at the location indicated. I (we) are the original payor of the escrow or have provided a signed release from the original payor or have provided other legal documentation which allows payment to be made to me (us). If Further, I (we) the undersigned, are in agreement that the escrow balance being returned is accurate. Signed: ______ Name (Print) ______ Date: _____ Address: ____ FINAL INSPECTION REPORT All building materials delivered /___/ Culvert required Culvert NOT required Culvert installed at bottom of ditch or driveway is at highpoint Construction entrance has been installed Ditch Sloping is less than a 4:1 Soil tracking onto roadway has been cleaned 70% of disturbed Right-of-Way (ROW) has been established Any damage to roadway has been repaired No obstructions added to ROW Escrow needs to be returned Final Inspection completed on: ______ By: _____ Funds Released by: ______Title____

Signed:______ Date: _____