



# DEPARTMENT OF PUBLIC WORKS

## DRIVEWAY/CULVERT APPLICATION

PERMIT No. \_\_\_\_\_

Fee \_\_\_\_\_

Rec. # \_\_\_\_\_

Staff Initials \_\_\_\_\_

To be completed by Town personnel

Owner: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Phone: \_\_\_\_\_ E-mail: \_\_\_\_\_

Permanent  Temporary Application Date: \_\_\_\_\_

Legal Description of property where culvert/access is to be located:

Parcel # \_\_\_\_\_ Lot # \_\_\_\_\_ Subdivision or CSM # \_\_\_\_\_

Is the culvert location staked or marked? Yes  No  (Please provide map showing location)

I understand and agree that the submission of this application to the Town of Grand Chute shall not in any way be construed as implying consent and/or permission for any work to be performed in street right-of-way and, if the permit is approved, it shall be issued in the name of the CURRENT PROPERTY OWNER ONLY.

I will comply with the terms and conditions of any permit that may be issued by the Town of Grand Chute.

Property Owner/Agent Signature \_\_\_\_\_

Date \_\_\_\_\_

### Town Staff Review/Comment

Site plan or special exception conformance/conditions \_\_\_\_\_

Roadway agreement required? Yes  No

Roadway agreement executed? Yes  No  N/A

Access controlled by: Outagamie County approval  N/A

State of Wisconsin approval  N/A



To Be Completed by Applicant



# DEPARTMENT OF PUBLIC WORKS

Culvert grades set by contractor to provide positive drainage

Benchmark Elev. = \_\_\_\_\_

Benchmark Description: \_\_\_\_\_

N / W Culvert El. = \_\_\_\_\_ Invert The invert is the bottom inside of the pipe.

S / E Culvert El. = \_\_\_\_\_ Invert

**GRADE STAKES:**

N / W Stake El. = \_\_\_\_\_ CUT \_\_\_\_\_ feet to N / W Invert

S / E Stake El. = \_\_\_\_\_ CUT \_\_\_\_\_ feet to S / E Invert

**NOTE: Flared end sections are require for permanent installations.**

This permit shall expire on \_\_\_\_\_ Permanent Access

Access Location \_\_\_\_\_

Culvert Length/Access Width \_\_\_\_\_ Culvert Diameter \_\_\_\_\_

This permit is issued subject to the terms and conditions of the Town of Grand Chute, including but not limited to Section 16.01 of the Town Code.

**Please contact the Department of Public Works when the installation s complete.**

**ISSUED:**

\_\_\_\_\_  
Town Official's Signature Date

**APPROVED:**

\_\_\_\_\_  
Town Official's Signature Date

