



Instructions: Print all information in ink. Completely fill out. Applications with missing information are considered incomplete and cannot be accepted. Please allow 10 business days for permit processing.

PROJECT LOCATION		
Street Address:		
City:	State: WI	Zip:
Municipality: Town of Richmond		
OWNER INFORMATION		
Name:		
Mailing Address:		
City:	State:	Zip:
Phone:	Phone 2:	
Email:		
CONTRACTOR INFORMATION		
Name :		
Street Address:		
City:	State:	Zip:
Email:		
Phone:	Phone 2:	
Dwelling Contractor License:		EXP:
Contractor Qualifier License:		EXP:
CULVERT DESIGN *SIZE, DESIGN, LOCATION MUST MEET TOWN OF RICHMOND ROAD AND DRIVEWAY & DRIVEWAY ORDINANCE#2010-10-08. PROPERTY OWNER'S RESPONSIBILITY. FINAL APPROVAL BY INSPECTOR.		
Culvert Diameter: _____Inches (Minimum 15")		
Culvert Length: _____Feet (Minimum 24 ')		
Culvert Construction: Steel Concrete		
SITE PLAN (Include distances from nearest driveways, intersections, lot lines and any special restrictions or clearances. Indicate direction.)		

DRIVEWAY DESIGN	
Width at Roadway: _____Feet	
Distance from Property Lines: _____Feet* _____Feet*	
Distance to nearest intersection: _____Feet**	
Distance to nearest driveway: _____Feet**	
Length of Driveway: _____Feet	
*Measured from edge of drive to lot line	
**Measured from center to center	
APPLICANT'S STATEMENT	
Any driveway shall be constructed in accordance with all requirements of the municipality ordinances. The maintenance of the driveway shall be the responsibility of the applicant.	
_____	_____
Applicant Signature	Date

Print Name	