

PERMIT

TO INSTALL ACCESS DRIVEWAY TO TOWN HIGHWAY-STATE STATUE 86.07(2)

The undersigned owner, legal occupant or operator, of described property, hereby requests permission to construct a driveway as described below.

McMillan Township

T N - R E

SECTION

PART OF SEC. SE-SE

Pin or Parcel Number:

REQUEST BY LANDOWNER

NAME

PHONE

ADDRESS

LOCATION DESCRIPTION

DRIVEWAY USAGE (Circle One): Residential - Agricultural - Commercial - Industrial

Culvert Diameter Inch

Culvert Length Ft.

PLEASE INITIAL ITEMS 1 THRU 4

- 1. APPLICANTS OBLIGATION TO COMPLY WITH ALL LOCAL ORDINANCES.**
- 2. APPLICANT IS RESPONSIBLE FOR INSTALLATION AND MAINTENANCE.**
- 3. MINIMUM OF 10 FEET FROM PROPERTY LINE.**
- 4. PERMIT VALID FOR 6 MONTHS FROM DATE ISSUED.**

ACCEPTANCE OF CONDITIONS

I, the applicant, hereby certify that the statements contained in the application are true and correct, that I have read and understand the conditions on the reverse side of this form, and, if granted a permit, I will comply with all terms and conditions which apply.

By _____
Applicant or Authorized Representative Date

By _____ Date
Signature of Town Chair or Authorized Town Representative

Return one (1) signed copy to

Town of McMillan
113904 Elm Tree Road
Marshfield, WI 54449

DRIVEWAY NO FEE PERMIT