

"The Island City"

TOWN OF MINOCQUA

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APPLICATION FOR PERMIT FOR ACCESS TO A PUBLIC ROAD IN THE TOWN OF MINOCQUA

Applicant Name: _____

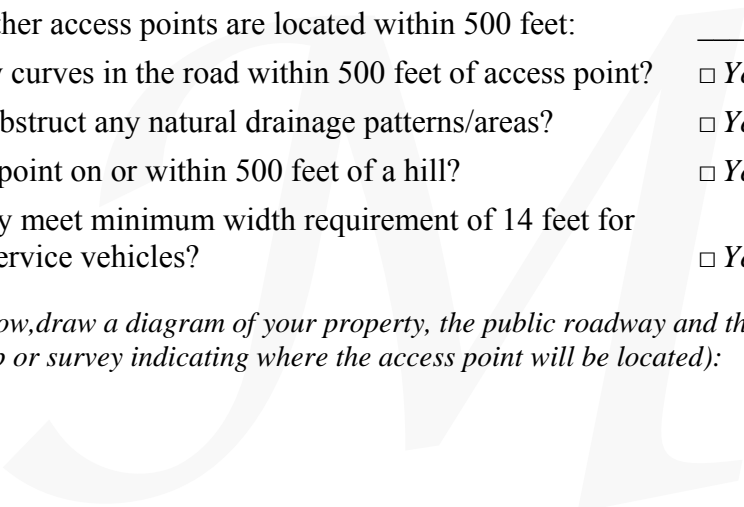
Applicant Address: _____

Property Address: Please provide accurate directions
and make sure area is marked clearly _____

Applicant Telephone Numbers: _____

- The access will be: *At road grade* *Above road grade* *Below road grade*
- Number of other access points are located within 500 feet: _____
- Are there any curves in the road within 500 feet of access point? *Yes* *No*
- Will access obstruct any natural drainage patterns/areas? *Yes* *No*
- Is the access point on or within 500 feet of a hill? *Yes* *No*
- Will driveway meet minimum width requirement of 14 feet for emergency service vehicles? *Yes* *No*

In the space below, draw a diagram of your property, the public roadway and the proposed access point (or attach a map or survey indicating where the access point will be located):



INSPECTION NOTES FOR SUPERINTENDENT OF PUBLIC WORKS: Date Rec'd _____ Date Reviewed: _____

Comments: _____

Approved Denied *Signature:* _____