

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: _____

****Make Sure Area is Clearly Marked***

Parcel Number: _____

Applicant Telephone Numbers: _____

Applicant Email Address: _____

- 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 or crest? *Yes* *No*
- Will driveway meet minimum width requirement of 14 feet for emergency service vehicles? *Yes* *No*
- Will driveway be within 5' of lot line? *Yes* *No*
- What is the driveway material at the roadway? Asphalt Gravel Concrete

REQUIRED: *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: _____