"The Island City"

Office Use
Address Application: __Y __N
Date Paid: _____
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TOWN OF MINOCQUA

415 Menominee Street, Suite A
Minocqua, Wisconsin 54548
Phone: 715.356.5296
Fax: 715.356.1132
www.townofminocqua.org

APPLICATION FEE: $100

Date: _____

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

Applicant Name and Address: _____

Applicant Email: _____Phone #:_____

Property Address or Road Name: _____

**** THE WIDTH OF THE DRIVEWAY MUST BE CLEARLY MARKED WHERE IT MEETS THE ROAD***

DRIVEWAY IS MARKED WITH: ____ Tape _____ Flags ____Paint ____Other (Specify)

**Driveway must be marked before application can be submitted

Parcel Number:_____

Property Owner Name and Address_____

Property Owner Email:_____ Phone #:_____

- 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 16 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:* _____