

TOWN OF GARFIELD (Jackson County, Wisconsin)
Permit Application to Construct a Driveway to a Town Road,
Complete all applicable sections. An incomplete application will be returned.

Return to:

Ardy Robertson, Clerk
Town of Garfield

114438 Valleybrook Ln
Osseo, WI 54758

Driveway Installation by: County Applicant Existing Entrance

Applicant Name: _____

Address: _____

Telephone: _____ (Home) _____ (Work)

Name of Road off which Driveway is to be constructed: _____

Which side of Road: North South East West

Driveway Type: Commercial Non-Commercial Urban Rural

Location of Driveway: (distance, direction, and name of nearest intersection)

_____ Feet, North South East West of Hwy./Road _____

Quarter _____; Section; _____ Township; _____ N; Range; _____

Project Completion Date: _____

**Note: If the driveway is not completed by the "Project Completion Date" specified, this permit is null and void and the driveway shall not be constructed unless authorized through a subsequent permit.*

Description of Proposed Work; (Be specific, attach drawings, sketches, etc. necessary to clarify work.)

Type of Finished Surface: Gravel Blacktop Concrete

ACCEPTANCE OF CONDITIONS

I, the above named applicant, certify, that the statements contained in this application are true and correct, and that I have read and understand the conditions stated in the permit, and that I will comply with all the terms and conditions as they apply, and I also understand that any changes in the work described in this application will require the filing for another permit before such changes are allowed. I further understand that maintenance of the driveway and any required drainage structures which are DOT approved are the responsibility of the applicant, successors, or assigns; and the use of rock, bituminous, concrete, timber, or other embankment retention or driveway marking treatments are prohibited, Issuance of this permit shall not be construed as a waiver of the applicant's obligation to comply with more restrictive requirements imposed by local ordinances.

Signature of Applicant: _____ Date: _____

RETURN SIGNED PERMIT TO ABOVE ADDRESS