



CITY OF WALKER
APPLICATION FOR HIGHWAY PERMIT
(residential drive)
 OFFICE 616-791-6854 FAX 616-791-6791

DATE: _____

STREET ADDRESS OF WORK: _____

PLAT NAME: _____

LOT NUMBER: _____

OWNER: _____

OWNER'S ADDRESS: _____

BUILDER'S NAME: _____

BUILDER'S ADDRESS: _____

CONTRACTOR'S NAME: _____


CONTRACTOR'S ADDRESS: _____

HIGHWAY LICENSE NUMBER: _____

APPROXIMATE LOCATION OF DRIVE: _____

SURFACE TO BE USED IN R.O.W.: _____

PERMIT NO. _____ FEE: _____

PROVISIONS OR RECOMMENDATIONS:	
	CORNER LOT. (DRIVE TO BE 60 FEET FROM INTERSECTING RIGHT OF WAY.)
	
<input type="checkbox"/>	REMOVE CURB TO NEAREST JOINTS. REPLACE GUTTER PAN AND INSTALL STANDARD DUB DOWN ENTRANCE WITH FLARES.
<input type="checkbox"/>	SIDEWALKS REQUIRED.
<input type="checkbox"/>	NO SAW CUTTING. (EITHER TO NEAREST JOINT OR LEAVE 3 FT. SECTION)
<input type="checkbox"/>	6" CONCRETE REQUIRED IN RESIDENTIAL DRIVE APPROACH.
<input type="checkbox"/>	HARD SURFACE DRIVE TO MEET TOP OF VALLEY GUTTER/BLACKTOP.
<input type="checkbox"/>	DITCH. CULVERT REQUIRED?
<input type="checkbox"/>	NO FINAL OCCUPANCY TO BE GIVEN WITHOUT SIDEWALK/DRIVE.
<input type="checkbox"/>	OTHER

PERMIT FOR WORK WILL BE ISSUED ONLY UPON PRESENTATION OF HIGHWAY LICENSE NO. REGISTERED WITH CITY OF WALKER.

REVIEWED AND APPROVED BY:

DATE: