

TOWN OF EAU GALLE
PERMIT FOR DRIVEWAY ACCESS TO TOWN ROAD

Applicant's Name: _____

Street Address: _____

City, State, Zip: _____

Location of Driveway:

_____ side of _____ Street or Avenue
_____ 1/4 of the _____ 1/4, Section _____. Town _____, Range _____

Culver Required? _____ Yes _____ No

If yes, Diameter _____ Length _____

If yes, culvert must meet Wisconsin DOT (Department of Transportation) standards.

***Applicant must pay cost of the culvert when billing or statement is received from Town Clerk.

Note: The driveway is to be installed before hauling any building material to the site.

Approved by:

Town of Eau Galle Board Member Date Signed

Signature of Applicant Date Signed

Driveway Permit Charge \$ _____

Payment Received: \$ _____

***Balance Due: Cost of Culvert

Clerk, Town of Eau Galle Date Signed