

VINTON COUNTY HIGHWAY SYSTEM
DRIVEWAY CULVERT PERMIT APPLICATION

DATE _____

APPLICATION IS HEREBY MADE BY _____

ADDRESS _____ PHONE _____

TO INSTALL A DRIVEWAY APPROACH FOR _____ USE ALONG

COUNTY ROAD# _____ ROAD NAME _____

DRIVEWAY WILL INTERSECT ABOVE RIGHT OF WAY _____ MILES

NORTH _____ SOUTH _____ EAST _____ WEST _____ OF _____

WORK WILL COMMENCE ON OR ABOUT _____ AND WILL REQUIRE _____ DAYS

TYPE OF STRUCTURE PROPOSED AND/OR EXISTING ON LAND:

_____ SINGLE FAMILY HOME; _____ DOUBLE WIDE; _____ MOBLIE HOME; _____ CABIN/CAMPER

_____ GARAGE; _____ BARN; _____ NONE; _____ OTHER (EXPLAIN) _____

Signature

INTERNAL USE ONLY

LOCATION CHECKED BY _____ *DATE* _____

CULVERT REQUIRED: _____ *DIAMETER* _____ *LENGTH*

_____ *MATERIAL TYPE*

DATE INSTALLED _____ *OTHER COMMENTS* _____
