

Application for an **ENTRANCE PERMIT**

Applicant's Name:			
Roll #:			
Applicant's Email Address:			
Applicant's Address:			
Telephone Number:			
Location of Proposed Entranc	e:		
Proposed Entrance for:		Existing Drainage Features at Proposed	
Farm or Field Entrance		Entrance Location: Open Ditching	
Single Family House		Curb and Gutter	
Multi-Family Housing		Storm Sewers	
Industrial		Other	
Commercial			

DAMAGE DEPOSIT REFUNDABLE UPON CLEARANCE BY TOWNSHIP STAFF – CALL FOR AN INSPECTION WHEN ALL WORK IS COMPLETED

SKETCH OF PROPOSED ENTRANCE OR SITE PLAN

(Include distance from road intersections, where applicable)

Date: _____

Applicant's Signature: _____

Township of Woolwich 24 Church Street West, Elmira N3B 2Z6

FOLLOWING SECTION TO BE COMPLETED BY TOWNSHIP OF WOOLWICH STAFF

Site Distance Visibility:			
Adequate			
Inadequate			
Is Curb Cut Required:			
Yes	What Length:		
No			
What is the surface and its	condition:		
Is a culvert required:			
Yes	Size: Lengt	h: Mate	rial:
No			
Comments (if any) from Pla	nning Department:		
Entrance Permit:			
Approved			
Not Approved			
Reason's (if not approved):			
Application Fee: \$			G/L 1-5-0800-870-331
Inspection Fee: \$			G/L 1-5-0800-870-331
Damage Deposit (Refundable	e): <u>\$</u>		G/L 1-2-7400-000-745
Receipt #:\$			

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