



TOWN OF NEWSTEAD DRIVEWAY PERMIT

Property Address _____

Owner's Name _____

SBL# _____

Applicant Name _____

Applicant Address _____

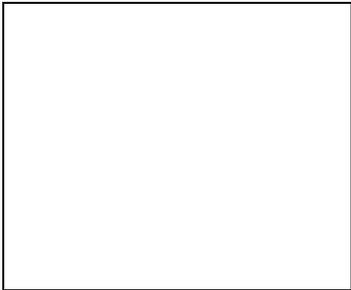
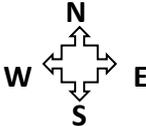
Applicant Phone _____

Requested Driveway Width: _____ ft.

Fee is to be paid AFTER reviewed and fee determined by Highway Superintendent

□

Driveway Location:

*Draw approximate location of house and driveway in the box above and identify the street.

Driveway without culvert.....\$ 150.00

Driveway with culvert.....\$ 300.00

Driveway additional cost.....\$

Total: _____

Amount Paid: _____

Date: _____

Check #: _____

Town Highway Department Use Only

Pipe length required: _____ Feet

Pipe diameter required: _____ Inches

Additional required aggregate _____ Tons

Inspected by: _____ Date: _____