TOWN OF PHELPS

4495 Town Hall Road, PO Box 157 Phelps, Wisconsin 54554 Phone/Fax: 715.545-2270 www.townofphelps.com

FEE: \$30.00

APPLICATION FOR PERMIT FOR ACCESS TO A PUBLIC ROAD IN THE TOWN OF PHELPS

Applicant Name:		
Applicant Addres	ss:	
Property Address	: (Please provide accurate directions a	and make sure area is marked clearly)
Parcel Number: _		
	Address:	
	e: $\Box At \ road \ grade \ \Box A$ access points are located with	Above road grade □ Below road grade in 500 feet:
	•	eet of access point? \Box Yes \Box No
• Will access obs	truct any natural drainage patt	terns/areas? $\Box Yes \Box No$
Is the access po	oint on or within 500 feet of a l	hill or crest? $\Box Yes \Box No$
• Will driveway vehicles?	meet minimum width requiren	ment of 14 feet for \square <i>Yes</i> \square <i>No</i> emergency service
	be within 5' of lot line? Yes	$\Box No$
•	veway material at the roadway	
In the space below,	draw a diagram of your propert	y, the public roadway and the proposed access point
(or attach a map or	survey indicating where the acc	ess point will be located):
INSPECTION NOTE	ES FOR PHELPS TOWN FOREMA	N:
Date Rec'd	Date Reviewed:	Comments:

□ Approved □ Denied Signature: _____