

Village of Eagle
820 E. Main St. • P.O. Box 295
Eagle, WI 53119

FOR INSPECTIONS:
Call: (262) 366-2400
Fax: (262) 594-5565

CULVERT SIZING PERMIT APPLICATION

Date: _____ Permit No. _____
Owner: _____ Phone Number: _____
Address: _____ City: _____
Installer: _____ Phone Number: _____
Address: _____ City: _____
Location Lot#: _____ Subdivision: _____
Address: _____ City: _____
Tax Key No.: _____
Legal Description: _____ 1/4 Section: _____ T _____ N R _____ (E or W)

Culvert Size: Width: _____
Length (Plus Aprons): _____

Driveways shall be a minimum of 5'0" from adjacent lot lines. A minimum setback of 3'0" from the road apron is required for masonry driveways.

Application Fee of \$ _____ Received On: _____

This permit is subject to the condition that the work shall be constructed subject to all rules and regulations as may be prescribed by the Town. All work must be performed and completed to the Town's satisfaction.

Signed: _____

Culvert at above location installed to proper specifications:

Signed: _____

Date: _____

Any additional costs for re-inspection must be paid PRIOR to the building permit being issued.