

**TOWN OF UTICA
DRIVEWAY PERMIT APPLICATION**

Property Owners Name: _____ Date: _____

Property Owners Address: _____

City, State, Zip Code: _____

Home Phone: _____ Cell Phone: _____

Email address: _____

Property Address if different from above: _____

City, State, Zip Code: _____

Parcel: _____ Section _____ Town _____ Range _____ Qtr/Qtr _____

The driveway will provide access to STH _____ CTH _____ Town Road _____

Proposed Land Use of Property _____

***Provide a sketch of proposed driveway including grade, slope, width and length of driveway and indicated turnoffs if required, and the dead- end turnaround on the back of this application. Specify erosion control procedures to be utilized: _____

Specify proposed roadbed, base, including depth and type of material: _____

The following minimum specifications shall apply to all new driveways installed after January 1, 2003.

Minimum road surface width..... 20 feet

Minimum width clearance..... 24 feet

Minimum height clearance free of trees and wires..... 18 feet

Maximum Grade..... 10 per cent

At least one 25 ft. in length and 18 ft in width segment of road surface shall be provided for each 300ft driveway length.

The driveway within the area of the public right-of-way shall slope away from the public road at a minimum of 1% and a maximum of 5% to prevent erosion onto the public road. An adequate road- bed of suitable material to support the projected traffic and any requirements for culverts shall be determined by the Town Board in considering an application or driveway approval. If culverts are required the minimum diameter shall be 18” at the dead end of the driveway, a turn around of at least 25 ft radius or some other method to allow vehicles to turn around shall be provided.

Continued.....

An inspection fee which includes inspection of Town Board members and/or Town Patrolmen is required to be submitted with all applications for a driveway. The fee of \$100.00 submitted to

the Town Clerk: Town of Utica Along with the Application
 Tanya Peterson, Clerk email: petentanyap@yahoo.com
 16436 Orchard View Road phone: 608-606-3336
 Gays Mills, WI 54631

Please contact Town Patrolmen Terry Bankes to set up inspection with Town Board members at 608-735-4646, leave a message if necessary. The fee will be refunded if the location for a driveway is denied. If a second inspection is not up to code, a new application must be submitted and a new fee will be charged.

All driveways shall be constructed in accordance with the above requirements and other specifications as may be set forth by the Town Board. The maintenance of the driveway shall be the responsibility of the property owner.

Applicant Signature

TO BE COMPLETED BY TOWN BOARD

A culvert ___ will ___ will not be required. If required a minimum diameter of ___ inches. The above driveway location has been ___ approved ___ denied by the appropriate highway jurisdiction on the ___ day of _____, _____.

Chairman Signature

Completion of driveway date: _____

Final Inspection date; _____