

Douglass Township Montgomery County
1320 E. Philadelphia Avenue
PO Box 297
Gilbertsville, Pa. 19525-0297

APPLICATION FOR DRIVEWAY PERMIT

AN APPLICATION WILL NOT BE CONSIDERED COMPLETE UNLESS ALL QUESTIONS ARE FULLY ANSWERED AND ALL SUPPORTING DOCUMENTS ARE INCLUDED WITH THIS DOCUMENT.

The driveway application should include the following:

1. Driveway application
2. Driveway sketch plan
3. Driveway notes and specifications

PERMIT FEE

NEW DRIVEWAY W/ CURB:	\$50.00
NEW DRIVEWAY WITHOUT CURB:	\$100.00
RESURFACE OR ALTERATION:	\$50.00

OWNER NAME: _____
FIRST LAST

ADDRESS: _____
NO. STREET CITY STATE ZIP

WORK PHONE#: _____ **HOME PHONE#:** _____

EMAIL: _____

CONTRACTOR NAME: _____
FIRST LAST

ADDRESS: _____
NO. STREET CITY STATE ZIP

WORK PHONE#: _____ **HOME PHONE#:** _____

EMAIL: _____

LOCATION OF PROPOSED DRIVEWAY: _____

LENGTH OF PROPOSED DRIVEWAY: _____ **WIDTH:** _____

DRIVEWAY ABUTS ON WHAT ROAD: _____

MINIMUM CURB RADIUS OF DRIVEWAY: _____

MAXIMUM CURB RADIUS OF DRIVEWAY: _____

DOES CURBING EXIST ON STREET ABUTTING DRIVEWAY: _____

SIZE AND TYPE OF PIPE BEING USED (IF APPLICABLE): _____

TYPE OF SURFACE MATERIAL PROPOSED: _____

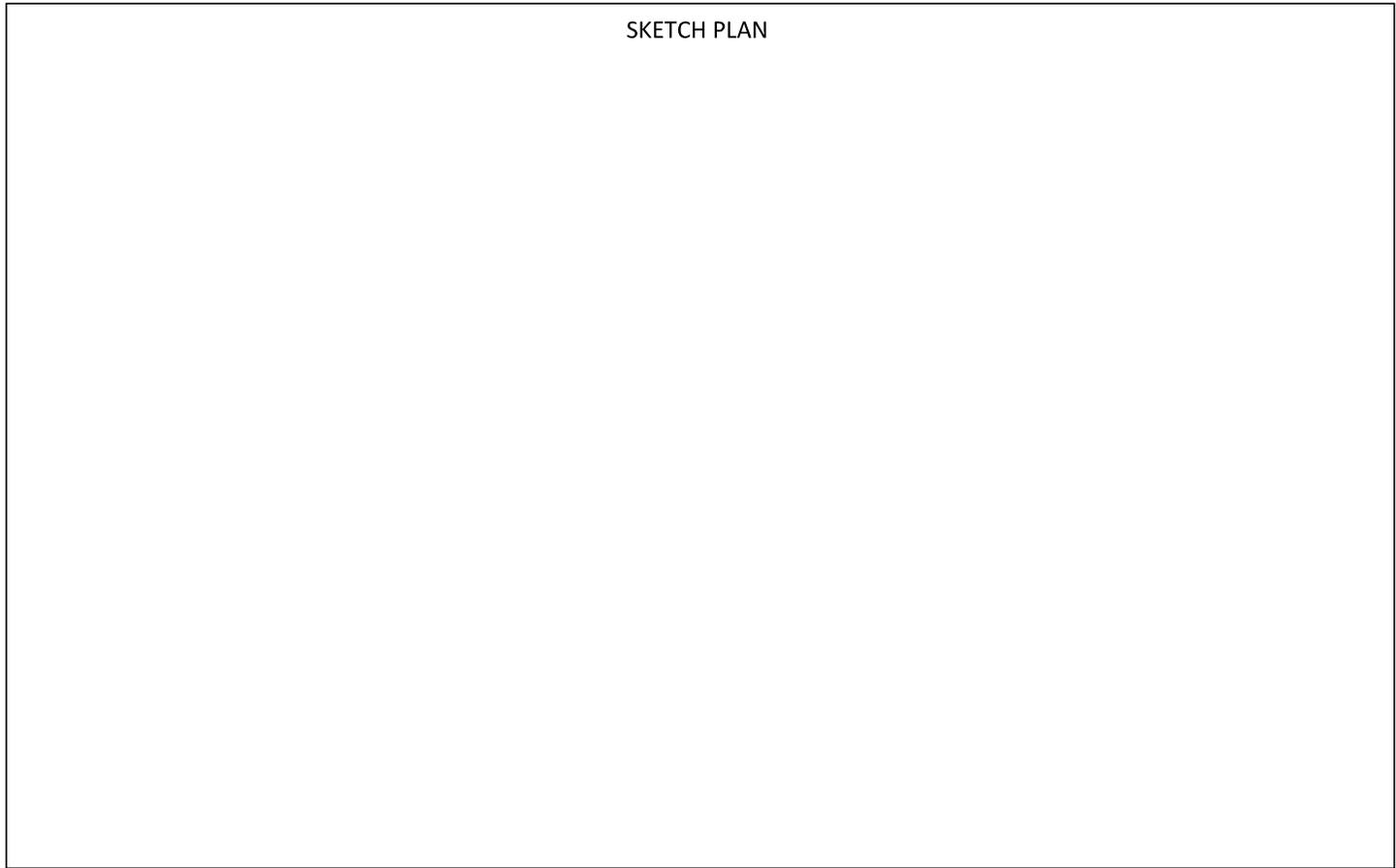
TIME OF PROPOSED WORK: _____

TOTAL IMPERVIOUS GROUND COVER _____ % (WITH PROPOSED IMPROVEMENT)

I (we) hereby apply for approval of this application for a driveway permit. All sketches, plans, or any other supporting data shall be considered part of this application. I (we) agree in submitting this application that all applicable provisions of Douglass Township and all other applicable laws, ordinances, and regulations shall be complied with in the proposed driveway. I (we) further certify that this application with all supporting data is true and correct to the best of my (our) knowledge and belief.

DATE: _____ SIGNATURE: _____ (LAND OWNER OR AGENT)

SKETCH PLAN



OFFICIAL USE – DO NOT WRITE BELOW THIS LINE

BLOCK#: _____ UNIT #: _____ LOT #: _____ LOT SIZE: _____ SQ. FT.

COMMENTS / NOTES: _____

All construction must conform to the attached specifications. A driveway permit is good for one (1) year from date of issuance. If an extension is needed, you must notify the township.

PERMIT NUMBER: _____	
APPROVING ZONING OFFICER: _____	
PRINT	
SIGNATURE: _____	DATE APPROVED: _____
OFFICIAL DOCUMENT	