



Application # _____
 Fee: \$650.00
 Date Paid: _____
 Roll No: _____

APPLICATION FOR ENTRANCE PERMIT

Name of Applicant (Property Owner): _____

Mailing Address: _____
 _____ Postal Code: _____

Daytime Telephone No: _____

Property Description: 911 Address: _____
 Lot No. _____ Concession: _____
 Township _____
 Sub Lot No. _____ Plan _____

1. I hereby request that an inspection be made of my proposed entrance onto the Township Road known as: _____.

NOTE: It is the owners' responsibility to ensure that the proposed entrance is onto a Township road – if it is later determined that the entrance is not on a Township road, the Application fee will NOT be refunded.

Date permit is required: _____ . If permit is not required immediately, please contact Road Superintendent when required.

2. I understand and agree that the fee in the amount of \$650.00 includes a deposit of \$500.00, which will be refunded upon the completion of the entrance.

3. A survey or sketch of my property showing the proposed location of the entrance, is shown below.

4. I confirm that I have placed markers – 2 stakes wrapped in red plastic tape – at the proposed entrance site.

5. My contractor will be _____.

6. I understand and agree that my proposed entrance will not be installed until I am in receipt of specifications from the Road Superintendent, or his/her designate, and that the installation will conform to the specifications as detailed below.

7. I further understand and agree that I, or my Contractor, will notify the Road Superintendent or his/her designate, via the Municipal Office at 705-286-1260, 7 Milne Street, Minden, Ontario K0M 2K0, and request a final inspection prior to backfilling my entrance, and that I will rectify immediately any deficiencies revealed by a final inspection of which I am notified.

8. I also understand that this permit will expire six (6) months from date of approval if not completed.

_____ Date _____ Signature

Site Sketch by Owner

Site Visit Remarks & Material Specifications

Size of Culvert Required: _____

Conditions: _____

Signature Of Township Staff: _____

Date Of Inspection _____
 For Requirements

NOTE: Applicant to phone for Final Inspection

Final Inspection

Entrance Approval: Yes ___ No ___

Date: _____

Signature Of Staff:
