



Township of Drummond/North Elmsley

# \_\_\_\_\_

Public Works Department

310 Port Elmsley Road, Perth, ON K7H 3C7 613-267-6500 Fax 613-267-2083

### APPLICATION FOR ENTRANCE PERMIT

By-law 2008-004 Access to Township Roads Policy, available at [www.dnetownship.ca](http://www.dnetownship.ca)

Name of Owner: \_\_\_\_\_

ROLL NUMBER: \_\_\_\_\_ SEVERANCE # \_\_\_\_\_

Owner address: \_\_\_\_\_ Postal Code \_\_\_\_\_

Owner email address: \_\_\_\_\_ Phone \_\_\_\_\_

Name & Address to Mail Refund to: \_\_\_\_\_

\_\_\_\_\_ Post Code: \_\_\_\_\_

Agent Name: \_\_\_\_\_ Agent email: \_\_\_\_\_

Agent phone: \_\_\_\_\_

**IF THIS IS A COUNTY ROAD YOU MUST APPLY TO THE COUNTY FOR THE ENTRANCE; HWY 7 apply to MTO**

Location of Entrance: \_\_\_\_\_

Closest existing pin #: \_\_\_\_\_ Pin # at property: \_\_\_\_\_ Township: DR or NE

Lot \_\_\_\_\_ Cone: \_\_\_\_\_ Part: \_\_\_\_\_ RP (Reference Plan) # \_\_\_\_\_

Type of Entrance: O single res. O Common res. D Multi- Res. D Private Road O Field D Other

Standard single: SM (16.4ft), Common res: SM (26.Sft). Request oversize O size: \_\_\_\_\_

Reason for oversize: \_\_\_\_\_

**O Commercial/Industrial/Institutional additional information:**

Type of commercial activity \_\_\_\_\_ Proposed hours of operation \_\_\_\_\_

Year round O Seasonal O Anticipated vehicles per day: \_\_\_\_\_, percentage heavy truck \_\_\_\_\_

Multi-res – number of dwellings \_\_\_\_\_

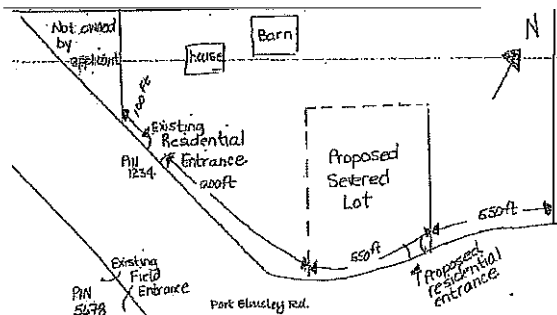
**O Common residential Entrance Agreement :**

*I/we owners listed below am/are the legal property owners(s) of the adjacent property to the property that is the subject of this application. I/we are in agreement that my/our entrance will become a common entrance as per the intent of the application. I/We understand that any and all agreements between property owners relating to installation, works, maintenance, costs, etc are between the property owners and that the Township of Drummond/North Elmsley is in no way responsible or liable.*

|                    |         |      |                |
|--------------------|---------|------|----------------|
| Signature of owner | witness | date | contact number |
| Signature of owner | witness | date | contact number |
| Signature of owner | witness | date | contact number |
| Signature of owner | witness | date | contact number |
| Signature of owner | witness | date | contact number |

**MANDATORY** Sketch Accompanying Application

APPLICATION # \_\_\_\_\_



Applicant Name: \_\_\_\_\_

PAID DATE: \_\_\_\_\_

SITE VISIT DATE: \_\_\_\_\_

SPECIFICATIONS: surface \_\_\_\_\_

culvert length \_\_\_\_\_ Culvert diameter \_\_\_\_\_

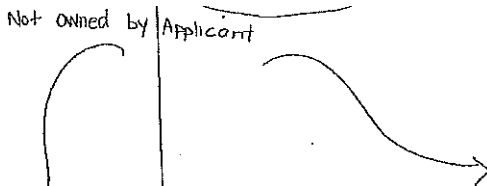
COMMENTS: \_\_\_\_\_

FINAL INSPECTION REQUEST: \_\_\_\_\_

FAILED SECOND SITE VISIT: \_\_\_\_\_

PASS TO ISSUE PERMIT & REFUND AMT: \_\_\_\_\_

DATE: - \_\_\_\_\_ Authorized by: \_\_\_\_\_



DRAW YOUR SKETCH HERE:

**Mandatory** –your application will not be processed without this sketch. If this is a severance please include a copy the Reference Plan clearly indicating the PART