

DRIVEWAY PERMIT APPLICATION IN PORTER TOWNSHIP

Permit No. _____

Applicant Take Note:

- 1) THIS DRIVEWAY PERMIT IS IN EFFECT FOR ONE YEAR. THE PROJECT MUST BE STARTED WITHIN ONE YEAR OF DATE ISSUED. **AFTER ONE YEAR, THIS PERMIT EXPIRES**, AND A NEW PERMIT MUST BE APPLIED FOR.
- 2) ANY FALSE OR MISLEADING STATEMENTS BY THE APPLICANT ON THIS PERMIT SHALL LEAD TO ITS IMMEDIATE REVOCATION.

Date of Application _____ Signature of Applicant _____

Name of Applicant _____

Name of Property Owner if different _____

Address for Permit _____

Zoning Classification of Property _____ Phone # _____

New Driveway _____ Modified Existing Driveway _____

Minimum Use Residential ____ Low Volume Home Occpncy ____ Medium Volume Business ____

Cost of Construction \$ _____ Permit Fee Paid \$ _____ Check# _____ Cash _____

Anticipated Start date _____ Anticipated completion date _____

Drawing of Land Use & Dimensions (sketch below driveway in relation to Main Road, setbacks & building)

Zoning Officer Signature of approval, _____

ON SITE ASSESSMENT DATE _____ COMMENTS _____