

Driveway Connection/Curb Opening

Permit Review

Permit Number _____

Homeowners:

Address:

Name of Applicant, if different from Homeowner:

Date Application filed with Clerk: _____

Reviews:

Zoning Officer (Driveway only)	Approved	Approved with comments	Disapproved
Signature _____ Date: _____			

Reviews:

DPW Official	Approved	Approved with comments	Disapproved
Cash Deposit Required:			
Signature _____ Date: _____			

Permit Issued:

Date: _____ Escrow Acct # (if needed): _____

Escrow Amount : _____

Estimated Date of Completion: _____

Inspection:

DPW	Approved	Approved with comments	Disapproved
Signature _____ Date: _____			

Escrow Release: