

APPLICATION/PERMIT TO CONSTRUCT DRIVEWAY

TO IOWA COUNTY TRUNK HIGHWAY SYSTEM

By authority provided in Chapter 86.07 (2) Wis. Stats

Please fill out the required information on this form and submit with application fee to the Highway Office per the attached instructions. **PLEASE PRINT OR TYPE.**

IIISTUCTIONS. PLEASE PRINT OR TIPE.							
Applicant/Property Owner Name	Phone #		Nearest Fire Numl	ber	County		
Click here to enter text.	Home: Click here. Cell: Enter text.		Click here to enter te	ext.	Click here to enter text.		
Applicant/Property Owner Mailing Addre	ss						
Click here to enter text. Click here to enter text.			□ Town of Click here to enter text. □ Village of Click here to enter text.				
Tax Parcel Identification Click to enter	text.	Anticipated Completion Date: Click to enter date.					
Driveway Located Within The:							
□NW □NE □SW □SE 1/4 Quarter of							
□NW □NE □SW □SE Quarter of Section	# Click here to	o ente	r text.				
Township # Click to enter text. North, Range	# Click here t	o ente	er text.	East □West			
Type of Driveway:							
□ New Driveway	□ New Driveway □ Improve Existing Driveway						
□ Multi-Driveway (more than one residence) □ Relocate Existing Driveway (Single or Multi-Existing)				Multi-Existing)			
What type of use will the driveway serve? (Review Highway Access Ordinance Section 5 (f) sub (12)							
□ Type A Access □ Type B Access			☐ Type C Access			□Type D Access	
Type of access surface being constructed:							
□ Concrete □ Asphalt □ Base Coarse/Gravel							
Approximately how many times will vehicles use this driveway daily:							
□0-50 □51-150			□150-500			□ Over 500	
What side of the highway is the proposed driveway located?							
□North □South	□South		□East		□West		
Is the proposed driveway less than 300 feet from another driveway on the same highway?							
□Yes □No							
What is the name of the nearest side road from the proposed driveway?							



Click here to enter text					
Approximately how far miles) and in what direct			ad listed above (di	stance can be measur	ed in feet or
Click to enter text.	□North	□South	□East	□West	
Does this parcel of land	d abut or border along	side another public	road?		
□Yes			No		
If yes, please indicate r	oads' name Click h	ere to enter tex	t.		
How many existing driv	eways does this prop	erty currently have:	Click here to ente	r text.	
Are there any access re survey map, deed, acce			s to this property,	i.e., subdivision plat,	certified
☐ Yes (If yes, please su agreement with	bmit a copy of the acce	ess restriction [No		
Are there any access ea	asements across the	property (recorded o	r unrecorded)?		
☐ Yes (If yes, please su	bmit a copy.)	Г	No		
		VEWAY LOCATIO		tion	
Property Owner Name:	Click here to ent	ter text.			
Highway: Click here	to enter text.	Near	est Side Road: Cl	ick here to enter	text.



As shown on the example below, please measure and record the distances between the location of the proposed driveway and other driveways/public roads and the owner's property lines along the highway center line (CL). This information should be recorded on the centerline shown below the example and record distances in feet or miles.

Example:	Distance	Other Driveway Distance in feet or miles			
	Property Line	Proposed Driveway	Property Line	Public Road (Name)	
N N N CL	below showing proposed dri	iveway location. Circle the North A	Arrow in relation to the	highway.	



The construction and maintenance of the driveway shall be the responsibility of the applicant. It is understood and agreed that approval is subject to the applicant's full compliance with the pertinent Statutes, as well as any codes, rules, regulations, and permit requirements of other state and local jurisdictional agencies.

The applicant shall also comply with all permit provisions, superimposed notes, and detail drawings, which may be added by the Department. Any alteration of this form by the applicant is prohibited and may be cause to revoke this permit.

Upon completion of the driveway installation, applicant will be required to contact Commissioner by phone and/or letter stating the driveway is completed. After hearing from applicant, Commissioner will then do a second inspection to make sure driveway is in compliance.

Upon a satisfactory second inspection, Commissioner will sign in the space below. Our office will forward a signed copy to the applicant, Town Board, and Zoning Administration as a zoning permit will not be issued until they receive a signed copy from our office.

*This permit will expire one year from the date of the approval of this application. If the driveway is not completed by the "Completion Date" specified, a one-time 6 month extension may be obtained from the Department. This permit shall be considered null and void and the driveway shall not be constructed unless authorized through a subsequent permit.

APPLICANT SHALL PLACE A FLAG OR MARKER IN THE HIGHWAY DITCH VISIBLE FROM THE HIGHWAY AT THE LOCATION OF THE PROPOSED DRIVEWAY.

An aerial picture of the property must accompany the Driveway Permit Application. These can be obtained through lowa County Planning and Development Office at 608-935-0365 or by contacting the lowa County Highway Department.

If you have any questions, please feel free to contact our office at (608) 935-3381 or 1215 N. Bequette Street, Dodgeville, WI 53533

Signature of Property Owner	Date
Click here to enter text.	Click here to enter a date.



Additional permit provisions are listed below (to be	added by the Highway	y Department):		
PLEASE READ CAREFULLY. NOT A VALID DI SPACES PROVIDED BELOW.	RIVEWAY PERMIT UN	ILESS SIGNE	D BY COMMISSIONER IN BOTH	
Dear Driveway Applicant, After an initial inspection of the driveway for which you have applied, I hereby give approval for you to construct the driveway according to and with the recommendations of the enclosed permit.				
Highway Commissioner or Authorized Representat	ive	Date		
Driveway was reviewed for final acceptance and compliance with the Highway Access Ordinance by				
Highway Commissioner or Authorized Representat	ive	Date		
For office use only				
Name of Applicant	Permit Fee \$		See Access Ordinance for details	

	_	IOWA GOVERNMENT
Applicant Address	Amount Paid Check#	Type A - \$175.00 Type B - \$175.00 Type C - \$325.00 Type D - \$325.00
	Date#	
Phone #:		
Highway	Log Mile of Reference Poir	nt