

Town of Albany
Green County, Wisconsin
Driveway Construction Permit

Name of Property Owner _____

Name of Applicant _____

Address or Description of drive location _____

Date of Application _____

1. Town Board _____ denied driveway permit Date of Denial _____

Town Board _____ approved driveway permit Date of Approval _____

2. Engineer's Plan: _____ is not required _____ is required

Date approved by the Board _____

3. A culvert at the ditch line where the driveway meets the public road

_____ is required _____ is not required

4. Erosion control plan completed _____ yes _____ no

5. Security Deposit received by _____ Date _____

Chairman

Attested _____ Town Clerk

Supervisor

Supervisor

Signature of Applicant _____

Date Issued _____

Expiration Date of Permit _____ (One year from the issue date)

Adopted _____

Effective _____