TOWN OF CLARENDON, VERMONT
ACCESS PERMIT APPLICATION

Residential, Agricultural, Commercial, Industrial, Development, Other

Owner's/Applicant's:
Name: ____________________________
Contact Name [if a business]: ____________________________
Address: ____________________________
Telephone Number: ____________________________

Co-Applicant's:
Name: ____________________________
Address: ____________________________
Telephone Number [If different from above]: ____________________________

Location of work [town, highway route and approximate distance (feet or miles) from the nearest intersection and which side]: ____________________________

The undersigned request a Clarendon Access Permit to allow ____________________________, to construct an access in accordance with Vermont Department of Highways Standards to serve the applicant's property, know as ____________________________, which is located on the ____________________________ side of ____________________________ highway no. ____________________________.

Date work expected to begin: ____________________________ . The applicant agrees to maintain said access and adhere to the directions, restrictions and conditions forming a part of this permit.

Dated at ____________________________ , this ____________________________ day of ____________________________, 20________.

Applicant or Applicant's Agent: ____________________________ Title: ____________________________
(Print Name)

PERMIT APPROVAL

NOTICE: This permit is issued in accordance with Title 19, Chapter 11, Section 1111, V.S.A. relative to all highways within the control and jurisdiction of the Town of Clarendon, Vermont. The issuance of this permit does not release the applicant from any requirements of statutes, ordinances, rules and regulations administered by other governmental agencies. The permit will be effective upon compliance with such of these requirements as are applicable and continue in effect for as long as the present land use continues. Any change from the present land use will require a new permit. This permit is issued subject to the directions, restrictions and conditions contained herein and any attachments hereto, and covers only the work described in this application, and then only when the work is performed as directed.

Where culverts are required the headwalls need to be made of symmetrical material. See below for other Road Commissioner recommendations/requirements:

________________________________________________________

________________________________________________________

________________________________________________________

The work is subject to the restrictions and conditions that may be listed on the reverse page; in addition, Special Conditions stated on any attached page (s)

Date work is to be completed: ____________________________ 20________

________________________________________________________

________________________________________________________

ISSUED DATE: ____________________________

BY: ____________________________ PRINT NAME: ____________________________

Authorized Representative for the Town of Clarendon
5/00 form amended 4/25/2011