

**TOWN OF WEST RUTLAND**  
35 Marble Street  
WEST RUTLAND, VT 05777  
(802) 438-2263 or fax 438-5133

**Application for Access and/or Right of Way Permit**

**Applicant:** \_\_\_\_\_ **Phone#** \_\_\_\_\_

**Mailing Address:** \_\_\_\_\_

**Property Owner:** \_\_\_\_\_ **Phone#** \_\_\_\_\_

**Mailing Address:** \_\_\_\_\_

Fee: \$25.00

Fee paid: \_\_\_\_\_

Rec't # \_\_\_\_\_

**Project Description**

Directions: Check appropriate items and attach sketch drawing(s) and location map.

\_\_\_ **ACCESS**

\_\_\_ **VT Agency of Transportation Standard B-71 has been reviewed.**

\_\_\_ **Construct a new access** -----or----- **Change an existing access**  
\_\_\_ Agricultural \_\_\_ Commercial \_\_\_ Industrial \_\_\_ Residential \_\_\_ Development \_\_\_

Distance to nearest intersection (feet) \_\_\_\_\_ Distance to nearest driveway \_\_\_\_\_  
Sight Distances: \_\_\_\_\_ and \_\_\_\_\_ Sight marked/flagged? \_\_\_\_\_

\_\_\_ **RIGHT OF WAY**

**Work type** (circle type): Utility Culvert Maintenance Driveway Installation Other

Explain: \_\_\_\_\_

Contractor \_\_\_\_\_

Proof of Contractor's Liability Insurance: Certificate # \_\_\_\_\_

Expected Date of Completion: \_\_\_\_\_ Intersecting Road \_\_\_\_\_

**Applicant statement:** I agree to adhere to the town's policies and minimum standards for the work requested in this application. I agree this does not release me from adhering to all legal and other permit requirements and that this permit only covers the work described in this application. Violations are subject to the penalties set forth in Title 19, Section 43, VSA of fines not less than \$100 nor more than \$10,000 each violation.

Date of Application: \_\_\_\_\_ Signature of applicant: \_\_\_\_\_

\*\*\*\*\*

**Approved By (Selectboard vote):** \_\_\_\_\_ **Date:** \_\_\_\_\_ (Permit expires in two years from the date of approval if construction is not complete.)

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\_\_\_\_\_