

Permit # _____

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#** _____

Physical Address: _____

Property Owner (if different from above): _____ **Phone#** _____

Mailing Address: _____

Fee: \$25.00

Fee paid: _____

check # _____

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.)

