

**Town of Wilmot**  
**Driveway Permit Application**

Tax map location of proposed or modified driveway: \_\_\_\_\_ Map # \_\_\_\_\_ Lot # \_\_\_\_\_

Landowner Name(s): \_\_\_\_\_

Landowner Current Address: \_\_\_\_\_

Landowner Phone Number: \_\_\_\_\_

Location of proposed driveway: \_\_\_\_\_

CIRCLE the type of driveway proposed: Permanent / Temporary / Modify Existing Driveway

As the land owner(s), We/I hereby agree to the following conditions:

- A. To bear all cost of construction and materials, including required drainage structures, necessary to complete the driveway to the Town of Wilmot's satisfaction;
- B. To hold harmless the Town of Wilmot and its duly appointed agent and employees against any action to personal injury and/or property damage sustained by reason of exercise of this permit;
- C. To abide by the provisions of the Driveway Regulations and the specifications below:
  - a. That the driveway be constructed in the location and with the dimensions as diagrammed as part of this application.
  - b. That any change or exceptions to the below specifications have written approval of the Board of Selectmen or its designee.
  - c. That the Board of Selectmen or its designee has the right to remove or correct – at the owner's expense – any driveway entrance not built in accordance with Town of Wilmot's Driveway Regulations or as outlined on this application form.
- D. To maintain the driveway, culverts and any other structures in good repair at my/our expense. Private driveway connections, including structures such as culverts, remain the continuing responsibility of the landowner, even those located within the right-of-way.
- E. To ensure that the driveway meets all provisions of State Wetlands Regulations.

The information provided is accurate to the best of my knowledge.

Landowner Signature(s): \_\_\_\_\_ Date: \_\_\_\_\_

\_\_\_\_\_ Date: \_\_\_\_\_

With this application form, the landowner(s) must also provide a plan view of the proposed or modified driveway showing:

- Town road or street the driveway fronts on.
- Other roads and streets within 40 feet.
- Clear all-season sight distance in all directions.
- Location and description of any drainage structures.
- Angle of intersection.

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THIS PAGE FOR ADMINISTRATIVE USE ONLY

Tax map location of proposed or modified driveway: Map # \_\_\_\_\_ Lot # \_\_\_\_\_

Date Permit Application Received: \_\_\_\_\_

Date of Board of Selectmen's meeting where this permit will be reviewed: \_\_\_\_\_

Town Departmental Review – Attach written comments to this permit application for filing

Fire Chief Comments (Date Received): \_\_\_\_\_

Police Chief Comments (Date Received): \_\_\_\_\_

Road Agent Comments (Date Received): \_\_\_\_\_

Permit Approved By: \_\_\_\_\_ Date: \_\_\_\_\_

*Selectboard Chair or Designee*

This permit is valid for one year from the date of approval.

Conditions Placed on the Permit:

1)

2)

3)

Final Inspection By: \_\_\_\_\_ Date: \_\_\_\_\_

*Road Agent*