

TOWN OF LIMA
Sheboygan County, Wisconsin

APPLICATION FOR DRIVEWAY PERMIT

I, the Undersigned (Owner or Agent) of the property for which this Driveway Permit is to be obtained for, understand the following:

- 1.) I have read and understand the Guidelines on the Road Drainage attached to this permit.
- 2.) I will make sure the culvert is installed properly.
- 3.) I will install the driveway according to the *Road Drainage Guidelines*.
- 4.) I will call for Inspection before pouring the Driveway.

Call: Michael Larsen (920) 627-1725

OWNER/AGENT

Name: _____ Phone: _____

Address: _____

City/State/Zip: _____

Site Address: _____ Parcel #: _____

Description of work: _____

Value: _____

Work performed by: _____ License # _____

Date work scheduled to begin: _____

Failure to follow the road Drainage Guidelines will result in the Removal of the lower portion of the driveway that is not in Compliance. The lower portion of the driveway will be made to comply and inspected again at the cost of the Owner or Agent.

OWNER/AGENT: _____ **DATE:** _____

INSPECTION BY: _____ **TIME:** _____ **DATE:** _____

Return to: Michael Larsen, Building Inspector
W3284 Stardust Lane, Sheboygan Falls, WI 53085
Phone: #920-627-1725
E-mail: inspectortownlima@gmail.com