

# TOWN OF HARMONY

## DRIVEWAY PERMIT

**Applicant Name:** \_\_\_\_\_

**Phone Number:** \_\_\_\_\_

**Email addresses** \_\_\_\_\_

**Address/Fire Number:** \_\_\_\_\_

**Parcel ID:** \_\_\_\_\_

**Driveway location, Onto \_\_\_\_\_ Road/Lane/Street**

(Must have safe sight distance in both directions at the public roadway. Safe manageable grade and does not obstruct natural drainage patterns.)

Provide a map showing driveway location with, reference, to adjacent roads and driveways. Mark the location with a post or some sort of semi-permanent marker visible from the road.

\*You may opt to contact Pete Strachan @ 608 689 2445 to meet on site and review your proposed driveway location.

**Owner Signature/Date:** \_\_\_\_\_

If you wish to send the application mail. Complete the form, attach any sketches, or maps and send it along with the permit fees (\$50.00) to:

Planning/Zoning Department, C/O Harmony Clerk

S4102 County Road O

Viroqua, WI 54665

harmonyclerk@tn.harmony.wi.gov

\_\_\_\_\_ **Township Use** \_\_\_\_\_

Sight distance \_\_\_\_\_ Safety issues? Y/N \_\_\_\_\_

Culvert required/ Size Y/N \_\_\_\_\_ / \_\_\_\_\_ Drainage issues \_\_\_\_\_

**Approval, Town of Harmony Representative**

**Signature/Date:** \_\_\_\_\_

**Permit Number** \_\_\_\_\_

Harmony docs 10/31/21