



WASHINGTON COUNTY PUBLIC WORKS DEPARTMENT
 11660 Myeron Road North • Stillwater, Minnesota 55082
 Phone: (651) 430-4313 • Fax: (651) 430-4350
 Jennifer.Oehler@co.washington.mn.us

Permit No.	_____
CSAH/CR	_____
Right of Way	_____
Municipality	_____
Storm Sewer	_____
Permit Fee \$	_____

ACCESS PERMIT APPLICATION

Permit Application shall be submitted 30 days prior to start of work.
Additional time may be required if plan revisions are needed.

Applicant (Owner of Access upon Completion)	Address (Street, City, Zip)	Tel.
		Email
Contractor <i>*must register with Washington County</i>	Address (Street, City, Zip)	Tel.
		Email
Access Address (if unassigned, provide PID)		
No. of existing accesses to property: Type of existing access, if any:	Purpose of Access: <input type="checkbox"/> Residential Driveway <input type="checkbox"/> Commercial Driveway <input type="checkbox"/> Public / Private Street, Name: _____ <input type="checkbox"/> Other: _____	<input type="checkbox"/> Agricultural Field Access <input type="checkbox"/> Construction Access
Estimated start date: Estimated completion date:		
Will the proposed access be: <input type="checkbox"/> Temporary <input type="checkbox"/> Permanent	Is a Building to be constructed? <input type="checkbox"/> No <input type="checkbox"/> Yes, Type: _____	Highway drainage carried via: <input type="checkbox"/> Ditch <input type="checkbox"/> Storm Sewer
Property is in: <input type="checkbox"/> Unplatted Area <input type="checkbox"/> Platted, Subdivision Name: _____		

Attach a drawing of the property, including existing accesses and structures (if applicable), proposed accesses, their relation to the County highway, and any adjacent streets.

(I) (We), the undersigned, herewith make application for permission to construct the access at the above location, said access to be constructed to conform with the regulations of Washington County and to any special provisions included in the permit. It is agreed that all work will be done to the satisfaction of Washington County. It is further agreed that no work in connection with this application will be started until the application is approved and the permit issued. It is expressly understood that this permit is conditioned upon replacement or restoration of the highway to its original or to a satisfactory condition. It is further understood that this permit is issued subject to the approval of local city, village, or township authorities having joint supervision over said street or highway.

 Print Name Applicant Signature Date

FOR OFFICE USE ONLY

ACCESS PERMIT AUTHORIZATION – PERFORMANCE REQUIREMENTS

A deposit of \$ _____, payable to Washington County, in the form of a Company Check, Certified Check, Cashier's Check, or Performance Bond shall accompany the application and will be returned upon final inspection and acceptance by the County. No interest shall be earned or paid on this deposit. It is the responsibility of the permit holder to notify the County when the work is completed. Check/Performance Bond No. _____

As a condition of this permit, culvert is required: Yes No Culvert Size – see attached conditions Culvert safety aprons required: Yes No

SPECIAL PROVISIONS: _____

If work is not completed by the permit expiration date, the cost of completing unfinished construction by County forces may be deducted from the deposit. If work will not be completed by the expiration date, contact Washington County Public Works, prior to expiration, to request a permit extension. In the event construction has not started prior to the expiration date, this permit becomes null and void, and the deposit will be returned.

This permit expires on: _____

Permission is hereby granted for construction of the access as described in this application and conditions of approval. Said access to be constructed in accordance with all regulations of Washington County and subject to the above requirements and/or special provisions. This permit is granted to the owner of access, "applicant", at the time the permit is issued and is non-transferrable without written consent from Washington County.

Approved: _____
 Authorized Signature Washington County Public Works Department Date