



WASHINGTON COUNTY PUBLIC WORKS DEPARTMENT
 11660 Myeron Road North ♦ Stillwater, Minnesota 55082
 Phone: (651) 430-4300 ♦ Fax: (651) 430-4350
 Publicworks@co.washington.mn.us

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

**APPLICATION FOR
STREET OR DRIVEWAY ACCESS PERMIT**

Please allow 2 weeks for processing

Applicant (Owner of Access upon Completion)	Address (Street, City, Zip)	Tel. Email
Access Construction Contractor	Address (Street, City, Zip)	Tel. Email

Legal Description of Property (abbreviate if necessary) and Street Address:

Purpose of Access:	<input type="checkbox"/> Public Street	<input type="checkbox"/> Private Street	<input type="checkbox"/> Commercial Driveway	Is a Building to be constructed?	<input type="checkbox"/> No	<input type="checkbox"/> Yes (Specify Type)
	<input type="checkbox"/> Residential Driveway	<input type="checkbox"/> Field Entrance				

Will the proposed access be:	<input type="checkbox"/> Temporary or <input type="checkbox"/> Permanent	Property is located in:	<input type="checkbox"/> Platted or <input type="checkbox"/> Unplatted area	<input type="checkbox"/> Subdivision	Highway drainage carried via:	<input type="checkbox"/> Ditch <input type="checkbox"/> Storm Sewer
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No. of existing accesses to property: _____
 Date needed: _____
 Estimated completion date: _____

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

OFFICE USE ONLY

A deposit of \$ _____, payable to Washington County Treasurer, in the form of a Company Check, Certified or Cashier's Check shall accompany the application and will be returned upon final 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 No. _____

(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.

_____ Date _____ Print Name _____ Signature _____

DO NOT WRITE BELOW THIS AREA

ACCESS DRIVEWAY PERMIT AUTHORIZATION – PERFORMANCE REQUIREMENTS

As a condition of this permit, culvert is required: Yes No Culvert Size _____x_____ Culvert safety aprons required: Yes No

If the work is not completed by the date given on this application, the cost of completing unfinished construction by County forces may be deducted from the deposit. In the event that construction has not started by this date, this permit becomes null and void and the permit fee shall be forfeited and the deposit shall be refunded.

SPECIAL PROVISIONS: _____

Permission is hereby granted for the construction of the driveway as described in this application. Said driveway to be constructed in accordance with all regulations of Washington County and subject to the above requirements and special provisions.

All work to be completed by _____

Approved: _____ Date _____
 Authorized Signature Washington County Public Works Department

Copies: Applicant County Engineer Municipality