

Town of Sullivan
Driveway/Culvert/Road Access
Permit Application

See Municipal Code 8.07(2) for requirements

A. Property Owner Information

Name: _____ Phone: _____ Email: _____
Address: _____ City, State, Zip: _____

B. Permit being applied for (*check one*):

- | | |
|---|--|
| <input type="checkbox"/> Driveway/Road Access + Fire Number - \$150 | <input type="checkbox"/> Culvert inspection + Fire Number - \$200 |
| <input type="checkbox"/> Field Entrance w/no Fire Number - \$50 | <input type="checkbox"/> Field Entrance + Culvert Inspection - \$100 |

Property address: _____

Application will provide access to (circle one):

State Road

County Highway

Town Road

Note: If no property address exists, and a fire number is required, you MUST obtain one from the County Land Office and include w/application. If access is to a State or County Road, a permit must first be obtained from the County and included w/this application.

C. Type of Driveway being applied for: (circle one)

Residential

Commercial

Field Entrance

Other _____

D. Project Location

1. Road being accessed: _____ on _____ (N,S,E,W) side of roadway
2. Work being performed by: _____
3. Estimated start date: _____ Estimated completion date: _____
4. Parcel Number: _____

E. Signature

Property Owner or Contractor

Date

**If you have any questions, please contact Town Operations Manager at: 262-354-4611
or the Clerk at: 262-593-8383. Mail this completed form along with payment to the Clerk at:
N3866 West Street, Sullivan, WI 53178**

To be completed by Town Personnel ONLY

Date Application Recv'd: _____ Amount of fee collected: _____ Clerk's Initials: _____

Date scheduled for inspection: _____ Inspection completed by _____ Date: _____

Date Fire Number Sign ordered: _____ Town employee Initials: _____

Notes: _____