

# TOWN OF WAITSFIELD, VERMONT

## APPLICATION FOR ACCESS TO A TOWN HIGHWAY (Curb Cut)

Town of Waitsfield \* 9 Bridge Street, Waitsfield, Vermont 05673 \* (802) 496-2218

Owner(s) of Property: \_\_\_\_\_ Telephone: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Applicant's Name (if different): \_\_\_\_\_ Telephone: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Town Road Name: \_\_\_\_\_ Town Highway #: \_\_\_\_\_

Parcel ID #: \_\_\_\_\_ Road Frontage of Parcel: \_\_\_\_\_

Proposed use of curb cut (check as many as apply):

- Agricultural    Residential    Commercial    Development Road  
 Alteration    Relocation    Change of Use

Describe the exact location of the proposed access (distance from property lines, distance to nearby landmarks, etc.):

\_\_\_\_\_  
\_\_\_\_\_

On the back of this sheet, or on a separate sheet, please prepare a sketch of the parcel and road frontage indicating the location of the proposed driveway access, other existing accesses, the Town highway, drainage/ditches, trees, buildings, etc.

I represent that the information contained in this application is true and that I am authorized to file this application.

\_\_\_\_\_  
Owner(s) Signature(s) \_\_\_\_\_ Date

\_\_\_\_\_  
Applicant(s) Signature(s) \_\_\_\_\_ Date

### **For Town Use Only:**

Application # \_\_\_\_\_ Date Received: \_\_\_\_\_ Total Fee Paid: \_\_\_\_\_

**TOWN OF WAITSFIELD, VERMONT**

**HIGHWAY ACCESS PERMIT  
(Curb Cut)**

PERMIT NUMBER: \_\_\_\_\_ DATE OF ISSUE: \_\_\_\_\_

PROPERTY OWNER: \_\_\_\_\_

APPLICANT: \_\_\_\_\_  
(If other than owner)

TOWN ROAD NAME & #: \_\_\_\_\_ PARCEL ID #: \_\_\_\_\_

APPROVED FOR: \_\_\_\_\_  
(Type of use)

Permission to do the work described on Application Number \_\_\_\_\_, dated \_\_\_\_\_, for access to a Town highway is hereby granted, subject to the requirements of Vermont statutes, the Waitsfield Selectboard Policy Regarding Driveway Accesses to Town Highways, the Vermont Agency of Transportation standard specifications B-71, and the following special conditions:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

All work authorized by this permit must be completed within one year of the approval date written above.

WAITSFIELD SELECTBOARD:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**TOWN OF WAITSFIELD, VERMONT**

**ROAD FOREMAN'S RECOMMENDATION REGARDING  
APPLICATION FOR ACCESS TO A TOWN HIGHWAY  
(CURB CUT)**

Application #: \_\_\_\_\_

Owner/Applicant Name: \_\_\_\_\_

Property Location: \_\_\_\_\_

I recommend denial/approval of the above application for the following reasons or subject to the following conditions:

- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_

\*\*\*\*\*

\_\_\_\_\_  
Road Foreman

\_\_\_\_\_  
Date