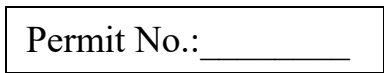




### SKETCH OF PROPOSED ENTRANCE LOCATION

This image shows a full page of blank graph paper. The grid consists of small, equal-sized squares formed by thin black lines. There are no margins, text, or other markings on the page.



**Tel.: 705-356-2251**  
**Fax: 705-356-7343**

# Driveway Entrance and/or Ditch Enclosure Permit

Owner's Name & Mailing Address	Legal Description of Property
	Township:
	Conc.:                      Lot:
E-mail:	Parcel:
Tel./FAX:	Roll No.: 57-38-000-

The location of the new culvert and/or ditch enclosure, size and mode of construction and resurfacing must be specified in this permit.

In the event of a contravention of this permit or the by-law, the Designated Municipal Official is authorized to enforce compliance by repairing or replacing the culvert to meet the specifications of this permit, at the cost of the landowner.

## Initial Inspection

1. Is the proposed location of the driveway suitable? (copy attached) ☐ Yes ☐ No
2. Is a culvert required? ☐ Yes ☐ No  
Type: \_\_\_\_\_ Diameter: \_\_\_\_\_ Length: \_\_\_\_\_ Gauge: \_\_\_\_\_
3. Is the proposed ditch enclosure suitable? ☐ Yes ☐ No
4. State type of resurfacing material to be used over culvert(s): \_\_\_\_\_
5. Comments: \_\_\_\_\_  
\_\_\_\_\_

Date Inspected

Designated Municipal Official

## Final Inspection

- |    |  |                          |     |                          |    |
|----|--|--------------------------|-----|--------------------------|----|
| 1. | Is the location of the driveway as approved during initial inspection? | <input type="checkbox"/> | Yes | <input type="checkbox"/> | No |
| 2. | Is the size of culvert as specified in this permit?                    | <input type="checkbox"/> | Yes | <input type="checkbox"/> | No |
| 3. | Is resurfacing material as specified in this permit?                   | <input type="checkbox"/> | Yes | <input type="checkbox"/> | No |
| 4. | Is ditch enclosure as specified in this permit?                        | <input type="checkbox"/> | Yes | <input type="checkbox"/> | No |
| 5. | State deficiencies or comments: _____                                  |                          |     |                          |    |
|    | _____  |                          |     |                          |    |
|    | _____  |                          |     |                          |    |

Final Approval? ☐ Yes ☐ No

Date Inspected

Designated Municipal Official