

LIBERTY TOWNSHIP – BELTRAMI COUNTY
APPLICATION FOR ACCESS ROAD/ DRIVEWAY PERMIT

Applicant(s) Name: _____ Phone: _____
Address: _____ Cell: _____
_____ Email: _____

Property Owner's
Name: _____ Phone: _____
Address: _____ Cell: _____
_____ Email: _____

Location of Proposed Driveway – Describe exact location _____

Parcel Number: _____ Nearest Public Road: _____

Purpose of Driveway: Residence Farmland Commercial Other (specify) _____

Is a building to be constructed? Yes No

Number of present driveways to property _____ Date proposed driveway will be needed? _____

I/We, the undersigned, herewith make application for permission to construct the access driveway at the above location, said driveway to be constructed to conform with the regulations of Liberty Township. 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 attached road to its original or to satisfactory condition.

Signature of Applicant(s) _____ Date

For Township Use Only – Do not Write Below the line

Pre-Inspection by: _____ Date: _____ Culvert Required: No Yes Size: _____

Approved by: _____ Date: _____ Applicant Notified Date: _____

Post-Inspection by: _____ Date: _____

Follow-up Required? No Yes Describe: _____