Application for Driveway Permit

Date of application: _________________________
Permit #: _________________________

Revision dates: Adopted by BOS 11/21/2016

Please attach a scaled map drawing of the driveway location (see page 2)

PROPERTY & CONTACT INFORMATION

Street Address

Zoning District: 
Tax Map & Lot Number:

Was a Planning Board Approval for Site Plan or Subdivision granted?
__Yes __No

Property Owner's Name:
Mailing Address:
Town, State, Zip:
Phone Number(s):
Email Address:

DRIVEWAY INFORMATION

For Town Road, contact Ashland Department of Public Works, (603) 968-3166 for recommendations to be submitted in writing to Building Inspector. For State Road, contact NHDOT District 3 Office, (603) 524-6667 or https://www.nh.gov/dot/ for application.

Dimensions: Width: ________________ Length: ________________ Approximate maximum slope: _____________

Description of Project:

INSTALLER/CONTRACTOR

Complete this section if you are hiring a CONTRACTOR to do the work:

Contractor Name: ___________________________________________________________
Mailing Address: ___________________________________________________________
Email: ____________________________
Phone Number(s): ____________________________

The undersigned hereby states that all the information contained in this application is true and accurate to the best of his/her knowledge and agrees that work will be completed in accordance with the plans and specifications submitted. This project will comply with all state and local codes, ordinances, and regulations. Any unauthorized changes or inaccurate information immediately renders the Driveway Permit null and void.

ALL PERMITS EXPIRE ONE (1) YEAR FROM THE DATE OF ISSUE.

SIGNATURE(S) OF APPLICANT(S) AND BUILDING INSPECTOR:

_________________________________________________________  _______________________________________    ___________________   Signature
SIGNATURE(S) OF APPLICANT(S)                                                                            Signature of Building Inspector                                 Date of Issuance

FEES (See attached schedule)

Questions: bldg@ashland.nh.gov and refer to Ashland Driveway Regulations. To receive a copy of approved application, provide a self-addressed stamped envelope, email address or fax number.
Information to be provided on the map drawing below or attached as specified in the *Building Regulations*,

**Article 3.2:**

- Length of street frontage;
- Location of any existing driveway;
- Property boundaries within one hundred feet (100’) of the proposed driveway;
- Distance to all street intersections within one hundred feet (100’) of proposed driveway;
- Location and dimension of proposed driveway within the street Right-Of-Way;
- Dimensions and specifications of proposed driveway's paved apron;
- Depth of fill over any culverts;
- Grade of proposed driveway;
- Length of sight distances in both directions along the street;