



Town of Foster

Est. 1781

Robert Clarkin, DPW Director
Phone: (401) 392-9204 · Fax: (401)702-5010

DRIVEWAY PERMIT APPLICATION

DATE: _____ PLAT: _____ LOT: _____

APPLICANT: _____

MAILING ADDRESS: _____

TELEPHONE NUMBER: ____ - ____ - ____

PURPOSE OF DRIVEWAY: _____

ROAD LOCATION: _____ NEAREST UTILITY POLE NUMBER: _____

PROPOSED DRIVEWAY MUST BE STAKED AND FLAGGED AT ROAD JUNCTION AT THE TIME OF SUBMISSION OF THIS APPLICATION.

The applicant understands that a certificate of occupancy will not be issued until all the town requirements have been completed. All work must be approved by the Public Works Director.

The applicant agrees as a condition governing the issuance of permits, that the Town of Foster, its agents and designees, be held harmless from any and all claims and actions whatsoever arising from the exercising of said permit.

NAME AND ADDRESS OF PROPERTY OWNER:

SIGNATURE OF APPLICANT

DATE

SKETCH OF DRIVEWAY AT ROAD, INCLUDE NORTH ARROW, AND DISTANCE TO NEAREST POLE

TOWN REQUIREMENTS: TO BE SUPPLIED BY DIRECTOR OF PUBLIC WORKS

NOTE: WHETHER OR NOT A DRIVEWAY CULVERT WILL BE NEEDED SHALL BE DETERMINED BY THE DIRECTOR OF PUBLIC WORKS DURING CONSTRUCTION OF SAID DRIVEWAY.

HOT ASPHALT APRON: _____

CUT EMBANKMENT FOR SIGHT DISTANCE: _____

DRIVEWAY CULVERT: _____ **DIAMETER SIZE:** _____

CONSTRUCT ROADSIDE SWALE: _____

OTHER: _____

PLEASE NOTE:

Foster does not have a town ordinance that governs the width, length, and general construction of driveways. It remains the applicant's responsibility to ensure that driveways are accessible to emergency vehicles. If planning for proper access is in doubt, please contact the Fire Department serving your area for consultation prior to driveway construction.