WEST PENNSBORO TOWNSHIP, CUMBERLAND COUNTY, PA APPLICATION FOR DRIVEWAY PERMIT

Name:			7.1	
Address:			Phone:	
Address:City:	State:	Zip:		
Property Owner: Address:			Pnone	:
Address: City:	State:	Zip:		
II. CONTRACTOR INFO	ORMATION – A		tractor's Regist	.47
Name:		Ph	one:	
Address:City:	Ctata	7: DA	Cantus at an ID#	
Jity	State 2	۲A PA	Contractor ID#	
	Stone @ 8" depth 7.5 mm Superpave @ 0.5 mm Superpave @ 1.5			
	TO BE COMPLETE	D BY WEST PENNSBO	ORO TOWNSHIP	
III. <u>DRIVEWAY ACTIVI</u>	ITY INFORMATION			
Road Rights-of-Way w	vidth at property:			
□ <u>NEW DRIVEWAY</u> To	o Enter Township Righ	t-of-Way and paving	of entrance:	
□ EXISTING DRIVEWA	AY to Be Paved with B	lack-Top <u>or</u> oil & chi _l	(Tar & Chip)	
National Register to Assessment 1920	fter Driveyyey Activity 7	Γook Place? YES	NO Date Disc	overed if Yes:
Was Permit Obtained A	The Driveway Activity			
	actual Requir			
Sight Distance <u>LEFT</u> A	Actual Requir	red		
Sight Distance <u>LEFT</u> A Sight Distance <u>RIGHT</u>	Actual Requir	red		
Sight Distance <u>LEFT</u> A Sight Distance <u>RIGHT</u>	Actual Requir	red		
Sight Distance <u>LEFT</u> A Sight Distance <u>RIGHT</u> Site Distance Requirement Required Inspections	Actual Require Actual Require ents Met? YES NO s: (Inspector's cell	red uired Date: I number 226-1689	9)	
Sight Distance <u>LEFT</u> A Sight Distance <u>RIGHT</u> Site Distance Requirement Required Inspections 1. When entrance is many	Actual Require Actual Require ents Met? YES NO s: (Inspector's cell arked for new driveway.	red paired Date: I number 226-1689 Approved	9) Denied	Date
Sight Distance <u>LEFT</u> A Sight Distance <u>RIGHT</u> Site Distance Requirement Required Inspections 1. When entrance is made at the contract of th	Actual Require Actual Require Requirements Met? YES NO ents Met.	red uired Date: I number 226-1689 Approved Approved	9) Denied Denied	Date
Sight Distance <u>LEFT</u> A Sight Distance <u>RIGHT</u> Site Distance Requirement Required Inspections 1. When entrance is many	Actual Require Actual Require Requirements Met? YES NO ents Met.	red uired Date: I number 226-1689 Approved Approved	9) Denied Denied	
Sight Distance <u>LEFT</u> A Sight Distance <u>RIGHT</u> Site Distance Requirement Required Inspections 1. When entrance is made at the contract of th	Actual Require Actual Require Requirements Met? YES NO see Inspector's cell arked for new driveway. It out and ready for stone ady for paving.	red uired Date: I number 226-1689 Approved Approved Approved	Denied Denied Denied	Date
Sight Distance <u>LEFT</u> A Sight Distance <u>RIGHT</u> Site Distance Requirement Required Inspections 1. When entrance is made and the contract of t	Actual Require Actual Require Require Requirements Met? YES NO State (Inspector's cell arked for new driveway. It out and ready for stone ady for paving.	nired Date: I number 226-1689 Approved Approved Approved	Denied Denied Denied Denied Denied	Date

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VI. <u>FEES</u>
Permit Fee: \$75.00
(Permit fee is non-refundable regardless if permit is approved or denied)
Date Paid: Check # Cash
(Permit must be applied for and approved by West Pennsboro Township prior to ANY DRIVEWAY ACTIVITY)
(Driveway Permits are valid for one (1) year from date of issuance)
(New Driveway locations MUST be marked on-site at time of application)
(Township MUST be notified at least 24 hours in advance of ANY construction or paving Activity)
PLEASE NOTE:
West Pennsboro Township Ordinance #2006-09, also known as the Driveway Permit Ordinance, requires any owner or contractor to obtain a Driveway Permit prior to any activity. Violations of Ordinance #2006-09 can carry a maximum fine
of \$300.00 if found guilty before a District Magistrate.
By my signature, I hereby authorize the appropriate officials of West Pennsboro Township to enter onto the property listed

on this application to allow any and all inspections required as a part of this permit process. Furthermore, if the applicant is not the owner of the property listed on this application, applicant hereby certifies that they have full authority by the property

owner to act and sign on their behalf for filing of this application.

Applicant Signature:_____