

APPLICATION IDENTIFICATION		TOWN OF WILSON'S MILLS STREET AND DRIVEWAY ACCESS PERMIT APPLICATION	
Driveway Permit No.	Date of Application		
County:			
Development Name:			
LOCATION OF PROPERTY:			
Route/Road:			
Exact Distance	<input type="checkbox"/> Miles <input type="checkbox"/> Feet	N S E W <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	
From the Intersection of Route No. _____ and Route No. _____ Toward _____			
Property Will Be Used For: <input type="checkbox"/> Residential /Subdivision <input type="checkbox"/> Commercial <input type="checkbox"/> Educational Facilities <input type="checkbox"/> TND <input type="checkbox"/> Emergency Services <input type="checkbox"/> Other			
Property: <input type="checkbox"/> is <input type="checkbox"/> is not within _____ City Zoning Area.			
AGREEMENT			
<ul style="list-style-type: none"> I, the undersigned property owner, request access and permission to construct driveway(s) or street(s) on public right-of-way at the above location. I agree to construct and maintain driveway(s) or street entrance(s) in absolute conformance with the current "Policy on Street and Driveway Access to North Carolina Highways" as adopted by the North Carolina Department of Transportation and the Town of Wilson's Mills. I agree that no signs or objects will be placed on or over the public right-of-way other than those approved by the Town of Wilson's Mills. I agree that the driveway(s) or street(s) will be constructed as shown on the attached plans. I agree that that driveway(s) or street(s) as used in this agreement include any approach tapers, storage lanes or speed change lanes as deemed necessary. I agree that if any future improvements to the roadway become necessary, the portion of driveway(s) or street(s) located on public right-of-way will be considered the property of the Town of Wilson's Mills, and I will not be entitled to reimbursement or have any claim for present expenditures for driveway or street construction. I agree that this permit becomes void if construction of driveway(s) or street(s) is not completed within the time specified by the "Policy on Street and Driveway Access to North Carolina Highways". I agree to pay a \$50 construction/application inspection fee. Make checks payable to Town of Wilson's Mills. I agree to construct and maintain the driveway(s) or street(s) in a safe manner so as not to interfere with or endanger the public travel. I agree to provide during and following construction proper signs, signal lights, flaggers and other warning devices for the protection of traffic in conformance with the current "Manual on Uniform Traffic Control Devices for Streets and Highways" and Amendments or Supplements thereto. Information as to the above rules and regulations may be obtained from the Town Development Compliance Officer. I agree to indemnify and save harmless the Town of Wilson's Mills from all damages and claims for damage that may arise by reason of this construction. I agree that the Town of Wilson's Mills will assume no responsibility for any damages that may be caused to such facilities, within the highway right-of-way limits, in carrying out its construction. The granting of this permit is subject to the regulatory powers of the Town of Wilson's Mills as provided by law and as set forth in the Town of Wilson's Mills Technical Standards and Specification Manual and shall not be construed as a contract access point. I agree that the entire cost of constructing and maintaining an approved private street or driveway access connection and conditions of this permit will be borne by the property owner, the applicant, and their grantees, successors, and assignees. I AGREE TO NOTIFY THE TOWN OF WILSON'S MILLS DEVELOPMENT COMPLIANCE OFFICER WHEN THE PROPOSED WORK BEGINS AND WHEN IT IS COMPLETED. 			
<div style="display: flex; justify-content: space-between;"> 2004-07 NOTE: Submit Two Copies of Application to Town of Wilson's Mills Planning Department 61-03419 TEB 65-04rev. </div>			

SIGNATURES OF APPLICANT

PROPERTY OWNER (APPLICANT)

WITNESS

COMPANY _____

NAME _____

SIGNATURE _____

SIGNATURE _____

ADDRESS _____

ADDRESS _____

Phone No. _____

AUTHORIZED AGENT

WITNESS

COMPANY _____

NAME _____

SIGNATURE _____

SIGNATURE _____

ADDRESS _____

ADDRESS _____

Phone No. _____

APPROVALS

APPLICATION RECEIVED BY TOWN OF WILSON'S MILLS.

SIGNATURE _____

DATE _____

APPLICATION APPROVED BY TOWN OF WILSON'S MILLS.

SIGNATURE _____

DATE _____

INSPECTION BY TOWN OF WILSON'S MILLS.

SIGNATURE _____

TITLE _____

DATE _____

COMMENTS: