

Town of Pittstown

R.D.2, Box 50, Valley Falls, N.Y. 12185

Office of Highway Superintendent

753-4220

Application for Pittstown Driveway Permit

Applicant:

Name: _____

Address: _____

Telephone Number: _____

Property Location: _____

Preliminary Inspection Standards:

- 1. Adequate sight distance Yes No
- 2. Culvert required for drainage? Yes No

Preliminary Approval: (required before Building Permit is issued by Code Enforcement Officer)

Granted Not Granted

Reason for disapproval or comments. _____

Signature Highway Superintendent: _____ Date: _____

Final Inspection Standards:

- 1. Adequate sight distance? Yes No
- 2. Intersection with road at right angles? Yes No
- 3. Culvert required for drainage? Yes No
- 4. Width at shoulder @ 15 ft. min? Yes No
- 5. Width @ right of way @ 10 Ft. min? Yes No
- 6. Adequate turn-around to avoid backing out onto road Yes No
- 7. Driveway entrance at negative grade away from highway Yes No
- 8. Emergency vehicle access adequate? Yes No

Final Approval: (required before Certificate of Occupancy is issued by Code Enforcement Officer)

Granted Not Granted

Reason for disapproval or comments. _____

Signature Highway Superintendent: _____ Date: _____