## ACCESS PERMIT APPLICATION

Permit # 21 - 17
Parcel ID: HV 242 7



Any new or modified access areas onto a Town highway requires Town approval. For access proposals on State roads, including RT 2 and RT 117, applicants are required to apply directly to VT Agency of Transportation. For local approvals, please review section 6.6 of the *Public Improvement Standards & Specifications for the Town of Richmond* (see municipal website) and provide all the information requested in this application. If you have questions please contact the Highway Department at 434-2631. Additional local permits and approvals may also be required, for information contact the Zoning Administrative Officer at 434-2430.

Application Date: 81921 Physical Address of Pro	perty: 2427 Hillview
Applicant Name: Tanmy & Bob Avono	da Property Owner Name: Hillview Heights L
Applicant Mailing Address: Po Box 4251	Owner Mailing Address: PO Box 4251
Burlington, VT. 05406	Burlington, VT 05406
Phone: 802 316 0074	Phone: 802-316-0071
Email: Tanny (a) avonda air .	Onemail: 1006@ avondagir, com
Description of Project: Improve IXI Shim	S driveway Is property in floodplain? NO
where erosion or undermining may be expected to occur. To terials as approved for installation in the access permit. The from the date of completion. For the replacement of existing culvert has failed. The landowner will pay for the pure landowner so that the culvert is affected by frost action, the	ion of the new or modified access. (see reverse) attached.  \$145 commercial ee to Planning & Zoning Office.
Applicant Signature date	Property Owner Signature date
— DO NOT WRITE BELOW THIS LINE—OFFICE USE ONLY—DO NOT WRITE B	
Application received by ZAO & forwarded to Highway Depart	tment (date & initial): 8/19/21 K-O
Application received & reviewed by Highway Department (days	ate): <u>} ]                                  </u>
Comments: OWNER WANTS TO GHASE	IN FUTURE DEVELOPMENT Additional comments on reverse
Highway Foreman Signature:	Date: 9-2-2/
Application received by Town Manager and scheduled for Se	electboard approval (date of SB meeting): 4/7/2i
	RAWN Comments:
Selectboard Chair Signature:	Date:
Return approved application to Planning & Zoning Office for	applicant notification and filing (ZAO date & initial):
TOWN CLERK'S OFFICE Received for Record:	A.D Ato'clockminutesM
And Recorded in Book: page	Attest:

Sketch Plan: Please include a Sketch Plan showing the proposed location of the new or modified access, with accurate measurements from the centerline of the proposed access (where it meet the town road) to any permanent mark. Please follow the specifications and profiles from the current Public Improvement Standards & Specifications for the Town of Richmond, including the culvert size (diameter and length). Additional information may be required depending on the nature of the project.

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Highway Department Comments: OWN EA IS ONLY ASKING TO UPCRADE EXISTING
DALVEWAY FOR FUTURE UNKNOWN LOTS. ASSUME THIS PERMIT IS
FOR SINKLE FAMILY RESIDENCE. NO CHLVENT NEEDED.
Is a post construction inspection required? YES /NO Reason for post construction inspection:
SIGNTLINE FROM ACCESS LOUING WEST IS 460', SIGNTLINE
FROM ACCESS LOOKING EAST 15 405', MINIMUM SIGHT RECUPED IS 250
Fee required (insert amount): Fee collected (include amount and date received):
Is an independent professional inspection required? YES NO Reason for independent professional inspection:
Fee required (insert amount): Fee collected (include amount and date received):
Highway Foreman Signature:  Date: 5-2-21
nigriway rotetilati signature/

Date of completed post construction inspection / independent professional inspection:

