



ACCESS PERMIT APPLICATION

Permit # Row 2024-03
Parcel ID: OL 0679

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...

Application Date: 2/29/2024 Physical Address of Property: Old County Road

Applicant Name: Tom Brayden Property Owner Name: Tom Brayden

Applicant Mailing Address: 1241 Camp Kiniya Rd Colchester, VT 05446
Owner Mailing Address: 1241 Camp Kiniya Rd Colchester, VT 05446

Phone: 802-578-6026 Phone: 802-578-6026

Email: tombrayden@gmail.com Email: tombrayden@gmail.com

Description of Project: 2 parcels - 1 curb cut each for a snl fam driveway Is property in floodplain? No

The Highway Department will review the proposal to ensure adequate sight lines, culverts and drainage issues. All new driveway culverts must have a minimum diameter of 15".

- Please include a Sketch Plan showing the proposed location of the new or modified access. (see reverse)
Town Highway Access Application Fee—\$115 residential/ \$145 commercial

Submit the completed application form with the required fee to Planning & Zoning Office.

Signatures: The undersigned hereby certifies this information to be complete and true.
Applicant Signature: [Signature] date: 2/29/24
Property Owner Signature: [Signature] date: 2/29/2024

DO NOT WRITE BELOW THIS LINE—OFFICE USE ONLY—DO NOT WRITE BELOW THIS LINE—OFFICE USE ONLY—DO NOT WRITE BELOW THIS LINE—OFFICE USE ONLY—

Application received by ZAO & forwarded to Highway Department (date & initial): TM 3/11/24 Fee:

Application received & reviewed by Highway Department (date): 3-19-24 Decision: APPROVED DENIED / WITHDRAWN

Comments: SIGHTLINE FROM ACCESS LOOKING NORTH Additional comments on reverse

Highway Foreman Signature: Date:

Application received by Town Manager and scheduled for Selectboard approval (date of SB meeting):

Selectboard Decision: APPROVED / DENIED / WITHDRAWN Comments:

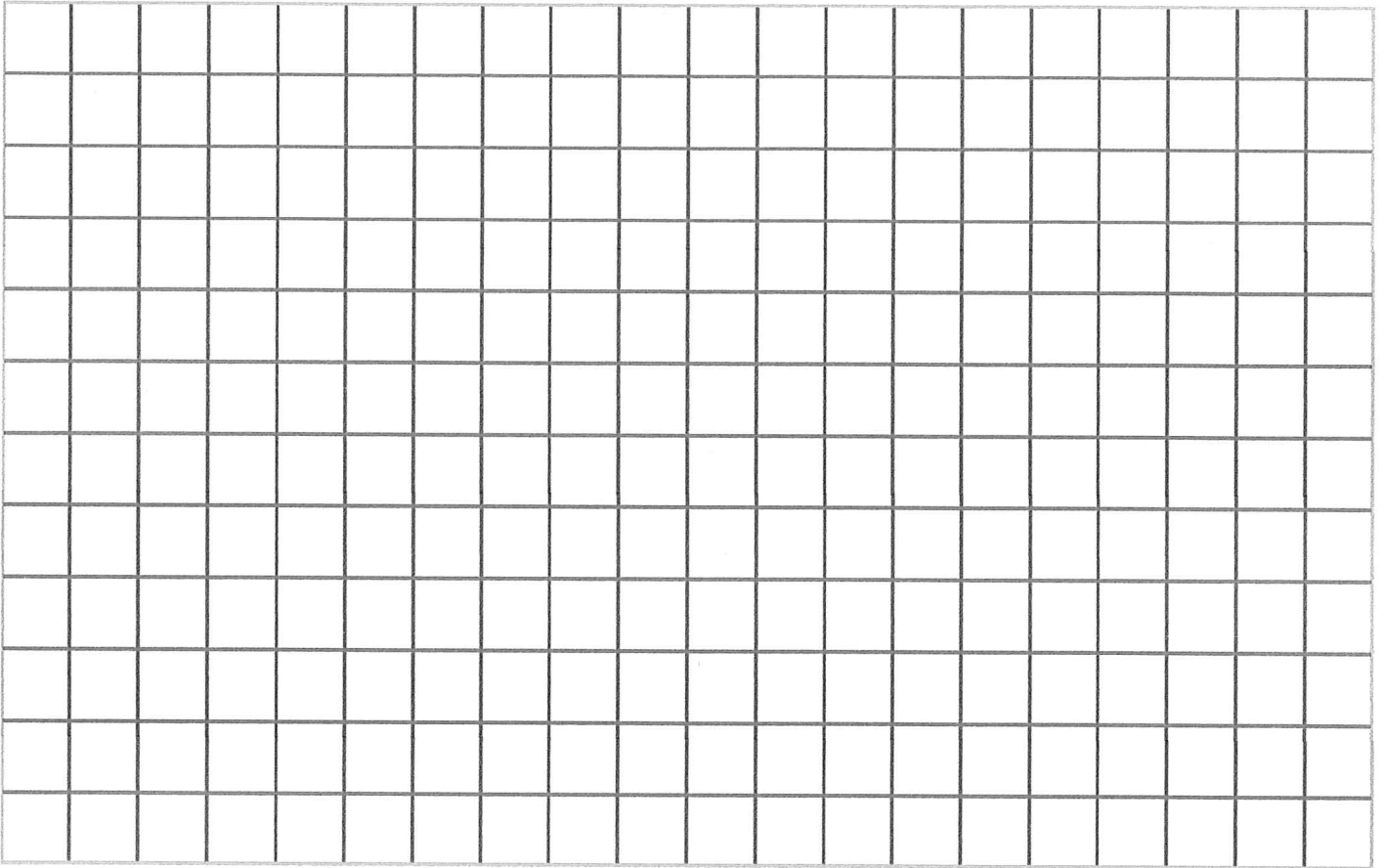
Selectboard Chair Signature: Date:

Return approved application to Planning & Zoning Office for applicant notification and filing (ZAO date & initial):

TOWN CLERK'S OFFICE Received for Record: A.D. At o'clock minutes M
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.

Sketch Plan:



— DO NOT WRITE BELOW THIS LINE—OFFICE USE ONLY—DO NOT WRITE BELOW THIS LINE—OFFICE USE ONLY—DO NOT WRITE BELOW THIS LINE—OFFICE USE ONLY —

Highway Department Comments: IS 415'. (OK) SIGHT DISTANCE FROM ACCESS
LOOKING SOUTH EXCEEDS 400'. (OK) 18" x 30' HOPE CULVERT
TO BE INSTALLED AS SHOWN ON PLANS.

Is a post construction inspection required? YES NO Reason for post construction inspection: _____

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: [Signature] Date: 4-10-24

Date of completed post construction inspection / independent professional inspection: _____

