



ACCESS PERMIT APPLICATION

Permit #: AC 2026-002
Parcel ID: AP0020

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: 7/20/26 Physical Address of Property: 20 Apple Tree Lane Richmond VT
Applicant Name: Kenan Heco Property Owner Name: _____
Applicant Mailing Address: _____ Owner Mailing Address: _____
PO Box 8594
Essex VT 05451
Phone: (802) 343-0576 Phone: _____
Email: kenanheco@yahoo.com Email: _____
Description of Project: Residential Access 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". Appropriate techniques such as headwalls and wingwalls may be required especially where erosion or undermining may be expected to occur. The landowner is responsible for purchasing and installing all required materials as approved for installation in the access permit. The landowner is responsible for all maintenance and repair for one year from the date of completion. For the replacement of existing culverts, the Highway Department will make the decision that an existing culvert has failed. The landowner will pay for the purchase price of the culvert. If the grade of the driveway is altered by the landowner so that the culvert is affected by frost action, the landowner will be responsible for repairs.

- ☐ 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: July 20, 2026
Property Owner Signature: [Signature] date: July 20, 2026

— 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): 7/20/26 DD Fee: \$115 (#537)

Application received & reviewed by Highway Department (date): 8-17-26 Decision: APPROVED / DENIED / WITHDRAWN

Comments: CORNER SIGHT DISTANCE FROM ACCESS LOOKING Additional comments on reverse

Highway Foreman Signature: [Signature] Date: 8-17-26

Application received by Town Manager and scheduled for Selectboard approval (date of SB meeting): 8/17/26

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:

[illegible]

Highway Department Comments: EAST ONTO GREYSTONE DRIVE REQUIRES TREE REMOVAL TO OBTAIN 275' SIGHT DISTANCE FROM ACCESS LOOKING WEST ONTO GREYSTONE DRIVE MEETS 275' REQUIREMENT. SIGHTLINE

Is a post construction inspection required? YES / ~~NO~~ Reason for post construction inspection: FROM ACCESS LOOKING
RIGHT^{IS} CLEAR TO END OF APPLE TREE LN. NO DRIVEWAY CULVERT
REQUIRED. SEE HIGHLIGHTED AREA FOR TREE REMOVAL ON SITE MAP.

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: 8-17-26

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

W. W. O. W. S. S. S.



