

Town of Alexandria, NH Driveway Application

Date Received: _____ Fee; ___Cash ___Check ___#

Type of Road to be accessed:

___Class IV ___Class V ___Class VI ___Private ___Other _____

Name of Road to be Accessed: _____

Purpose of Access:

___Driveway ___Camping ___Commercial ___Logging ___Other

If Other, Explain _____

NOTE: If you are requesting access off a State Highway, you must also provide the approval from the State of NH.

Owner: _____ **Map:** _____ **Lot:** _____

Address: _____

Phone: _____ **Cell:** _____ **E-mail:** _____

Abutting landowners: (preferably with structure on land)

Map ___ **Lot** ___ **Owner** _____

Map ___ **Lot** ___ **Owner** _____

Drawing: Please attach a sketch of your lot, indicating the location of the driveway and width of the proposed driveway as well as the number of feet from each side of the driveway to your lot lines.

NOTES: Water and ice buildup must not enter the main highway at any time of the year. If this occurs, the owner will be held responsible. If the owner fails to alleviate any ice and water issues, the Town of Alexandria reserves the right to correct any deficiencies and invoice the landowner for the cost. Facilities constructed in violation of the permit specifications or the rules, shall be immediately corrected upon notification by the Town of Alexandria. All costs shall be borne by the landowner.

I, _____ understand that no deviations from this permit may be made without prior written approval by the Town of Alexandria. Failure to comply may result in revocation of the permit. To the best of my knowledge and belief, the data and information accompanying this request for a driveway is true and correct.

Date; _____ Signed: _____

Town of Alexandria, NH
Approval for Initial Construction of Driveway Access

Approval is hereby given for the applicant referenced on Page 1 to construct a driveway on land identified as Map _____ Lot _____ .

_____ There is an all season, safe sight distance of 200 feet in both directions along the highway from the location of the proposed driveway. (Road Agent to initial)

Conditions, if any, placed on this permit:

Road Agent's Signature

Date: _____

NOTE: Construction completion is required within one year of permit date. Applicant shall contact selectmen's office at 744-3220 when driveway is complete. Once the road agent has inspected and approved the driveway, a 911 number will be issued and a number plate ordered.

FINAL APPROVAL

I, _____, Road Agent for the Town of Alexandria, have inspected the driveway referenced above and find it to be acceptable.

Signature: _____

Date: _____