Town of
FARMINGTON
LACROSSE COUNTY, WI

DRIVEWAY PERMIT & INSPECTION REPORT

Date	Parcel #	$25.00 Fee Payment	Permit #
		◯ Cash ◯ Check_____	D ____ - 20 _____

Project Address	Subdivision	Lot #	Block #

Owner Information

Name: _____

Address: _____

_____

Phone: ( ) _____ - _____

Email: _____

Proposed Driveway Location. Please Draw Diagram
Driveways must be staked out 24 hours after application.

Contractor Information ☐ SELF INSTALL

Name: _____

Address: _____

_____

Phone: ( ) _____ - _____

Email: _____

Construction Start Date	
Estimated Completion Date	

Requirements & Findings (TOWN USE ONLY)

Culvert Requirements circle one or note below	15” 18” 24” None
Length & Other Notes	

Notice of Noncompliance: All cited violations shall be corrected within **30 days** after written notification unless an extension of time is granted. All costs incurred by the Town relating to the enforcement of Ordinance #1-2005 or in making the determinations or inspections necessary hereunder shall be paid by the property owner, included, but not limited to, Town administrative costs and inspectors’ and attorneys’ fees. If property owner refused to comply with Ordinance #1-2005, the Town may install the culverts and charge back the cost of additional cost thereof as a special charge pursuant to Section 66.0627, Wis. Stats.

Slope	Approach
Acceptable Not Acceptable	Acceptable Not Acceptable

Remarks

Final Inspection By

Applicant Signature	Inspector Signature	Date

Initial Approval	Date