

# Driveway/ Right-of-Way Accessibility Permit

## Town of Starksboro

PO Box 91, Starksboro, Vermont 05487 | (802) 453-2639 | [www.starksborovt.org](http://www.starksborovt.org)

Property Owner Name \_\_\_\_\_

Mailing Address \_\_\_\_\_

Applicant's Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Road name where work will be located: \_\_\_\_\_ Parcel ID# \_\_\_\_\_

Associated Zoning Permit and/or DRB Application Numbers \_\_\_\_\_

1. Proposed Location must be pre-marked in the field and a site visit scheduled with the Road Foreman.
2. You must attach a dimensioned sketch of the road location noting property lines, and any required grading, culverts, and utility work.
3. Driveways are subject to Vermont Title 19 §1111, Town Land Use Regulations in effect at the time of application, and Agency of Transportation Standard Drawings A-76, B-71, and B71A.
4. Road Foreman must be notified before construction.
5. Warning signs and flag people must be supplied where needed.
6. Driveway must not drain run-off water onto town roads
7. Work must be complete within six (6) months of enacted date.
8. Power lines must be buried 4 feet deep and in a sleeve with electric caution tape 2 feet deep. All right of way work must be compacted in one-foot lifts.
9. Use of the driveway is subject to final inspection of the work by the Town.

Applicant's signature: \_\_\_\_\_ Date \_\_\_\_\_

### OFFICE USE ONLY

Fee Paid \$ \_\_\_\_\_ Check No. \_\_\_\_\_

### PRELIMINARY ACCESS DESIGN REVIEW

Road Foreman / Fire Chief Recommendations: (see attached notes if appropriate)

\_\_\_\_\_  
\_\_\_\_\_

Emergency Vehicle Access sufficient? Yes / No Comments: \_\_\_\_\_

Road Foreman approval \_\_\_\_\_ date \_\_\_\_\_ Fire Chief approval \_\_\_\_\_ date \_\_\_\_\_

### DRIVEWAY CONSTRUCTION START APPROVAL

Enacted this \_\_\_\_\_ day of \_\_\_\_\_ at Starksboro, Vermont.

Selectboard Chair signature: \_\_\_\_\_

### FINAL USE APPROVAL / CONSTRUCTION INSPECTION

(Attach Notice of Non-approval and corrective work required under separate cover)

Road Foreman approval by: \_\_\_\_\_ Date: \_\_\_\_\_

Zoning Administrator approval by: \_\_\_\_\_ Date: \_\_\_\_\_