

# Town of Pittstown

R.D.2, Box 50, Valley Falls, N.Y. 12185

## Office of Highway Superintendent

753-4220

### Application for Pittstown Driveway Permit

**Applicant:**

Name: \_\_\_\_\_

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

Telephone Number: \_\_\_\_\_

**Property Location:** \_\_\_\_\_

**Preliminary Inspection Standards:**

- 1. Adequate sight distance  Yes  No
- 2. Culvert required for drainage?  Yes  No

**Preliminary Approval:** (required before Building Permit is issued by Code Enforcement Officer)

Granted  Not Granted

Reason for disapproval or comments. \_\_\_\_\_  
\_\_\_\_\_

Signature Highway Superintendent: \_\_\_\_\_ Date: \_\_\_\_\_

**Final Inspection Standards:**

- 1. Adequate sight distance?  Yes  No
- 2. Intersection with road at right angles?  Yes  No
- 3. Culvert required for drainage?  Yes  No
- 4. Width at shoulder @ 15 ft. min?  Yes  No
- 5. Width @ right of way @ 10 Ft. min?  Yes  No
- 6. Adequate turn-around to avoid backing out onto road  Yes  No
- 7. Driveway entrance at negative grade away from highway  Yes  No
- 8. Emergency vehicle access adequate?  Yes  No

**Final Approval:** (required before Certificate of Occupancy is issued by Code Enforcement Officer)

Granted  Not Granted

Reason for disapproval or comments. \_\_\_\_\_  
\_\_\_\_\_

Signature Highway Superintendent: \_\_\_\_\_ Date: \_\_\_\_\_