TOWN OF PETERSHAM

Tim Graves, Highway Superintendent
31 South Street, P.O. Box 486
Petersham, Massachusetts 01366-0486

Office 978-724-3211 FAX 978-724-3501

DRIVEWAY PERMIT
STATEMENT OF CONDITIONS

_____ _____ _____
Applicant Date Permit No.

_____ _____
Name of Owner (If different from Applicant) Telephone No.

_____ _____
Address of Applicant Map No.

_____ _____
Location of Property Parcel No.

I, _____, hereby agree to the conditions set forth by the Highway Superintendent of Petersham and agree to complete all the necessary work to comply with these conditions prior to my receipt of a driveway entrance permit from the Town of Petersham. I understand that no occupancy permit will be issued until the driveway has been completed.

Conditions:

/ / Camber & swail to conform and follow water run off to ditch.
/ / Minimum of 30' by 12" corrugated steel or plastic culvert pipe. Head walls on each end of pipe. ADS N12 corrugated plastic.
/ / Compacted 6" or 12" crushed gravel over pipe.
/ / Paved apron 3" of asphalt. Paved from roadway to property line of owner with 6" gravel base.
/ / Crushed gravel apron 6" thick from roadway to property line.
/ / Landing approach before ditch line.
/ / Before paving, contact Superintendent.
/ / Driveway not to be relocated from plans.
/ / Driveway crowned.
/ / Call Dig Safe – Phone No. 1-888-344-7233. / /
/ / Driveway staked out.
/ / Apron lines painted for inspection prior to paving.
/ / No curb out. 4 ½ Radius
/ / Culvert maintenance is the landowner's responsibility. _____

_____ _____ _____
Highway Superintendent Inspector of Buildings Applicant

_____ _____ _____ _____
On Site Inspection Date Approved Rejected Signed

A plan of proposed work must accompany this application.
Driveway permit fee: $50.00 – No re-inspection fee.
Make checks payable to Town of Petersham – Permit expires one (1) year after date of issuance.
If an extension is needed, the applicant must apply in writing to the Superintendent. If granted, the extension will be for three (3) months.