

TOWN OF PETERSHAM

Highway Department

31 South Street P.O. Box 486

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www.townofpetersham.org
Gregory Waid -Superintendent

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DRIVEWAY PERMIT STATEMENT OF CONDITIONS

Applicant	Date	ePermit #
Name of Owner (if diffe	rent from applicant)_	
Telephone #		
Address of Applicant		Map #
Location of Property		Parcel #
and agree to complete my receipt of a drivewa	all necessary work to y entrance permit fro	t forth by the Petersham Superintendent comply with these conditions prior to m the Town of Petersham. I understand the driveway has been completed.
 Minimum of 30" by 12" or plastic. Compacted 6"or 12" crus Paved apron 3" of aspha Crushed gravel apron 6" Landing approach before Before paving, contact S Driveway not to be relocted Call Dig Safe-Phone #1 Driveway staked out. Apron lines painted for ir 	shed grave over pipe. Ilt. Paved from roadway to property editch line. uperintendent. ated from plans. -888-344-7233. aspection prior to paving. Radius	t pipe. Head walls on each end of pipe. ADS N12 corrugated erty line of owner with 6" gravel base. line
Applicant		ion date
		gned

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 (1) one 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 (3) three months.

Revision 7-2017.