

**TOWN OF BONE LAKE  
DRIVEWAY PERMIT**

PERMIT FEE \$25

DATE \_\_\_\_\_

Paid by Check \_\_\_\_\_ Cash \_\_\_\_\_

PHONE \_\_\_\_\_

APPLICANT NAME \_\_\_\_\_

MAILING ADDRESS \_\_\_\_\_

PROPERTY OWNERS NAME \_\_\_\_\_

DRIVEWAY ADDRESS \_\_\_\_\_

LOCATION: SECTION \_\_\_\_\_ TOWN \_\_\_\_\_ RANGE \_\_\_\_\_

Street or Avenue which driveway will cross \_\_\_\_\_

Person or Company which will do the construction \_\_\_\_\_

Phone \_\_\_\_\_

**All driveways shall be constructed according to the Town of Bone Lake Driveway Ordinance. I understand and agree to construct the proposed driveway according to these specifications. The maintenance of this driveway shall be the sole responsibility of the property owner.**

Signature of Applicant \_\_\_\_\_

Date \_\_\_\_\_

Signature of Town Official \_\_\_\_\_

Date \_\_\_\_\_