

DRIVEWAY • CULVERT • SIDEWALK PERMIT

City of Cave Junction PO Box 1396, 222 W. Lister St., Cave Junction, OR 97524 (541) 592-2156
PERMIT# _____

1. Applicant Name _____
2. Applicant mailing address _____
3. City _____ State _____ Zip _____
4. Applicant Phone _____ Owner Phone _____
5. Owner Name (if different from applicant) _____
6. Owner Address _____
7. Owner Consent (if applicable) Yes No
8. Address of property _____
9. Assessor's Map _____ Tax Lot _____
10. Contractor's name _____ Telephone Number _____
11. Proposed development: Commercial Residential
12. Type of development: Construct Repair Alter
13. Indicate which project you will complete below: (A separate application and fee will be required for any project not indicated and submitted with site plan)
 - Sidewalk: (Section 12.12.020)** ↘
 - Driveway: (Section 12.08.040)** → **Must conform to APWA standards**
 - Culvert: (Section 12.08.050)** ↗
14. Site Plan Requirements:
 - 8 ½ x 11" to drawing to scale, showing all of the following:
 - Existing sidewalk, driveway, culvert (if repair or alteration)
 - Sidewalk/driveway show cross section
 - Adjacent street(s), sidewalks, driveways, culverts, properties and structures
 - List of materials and specifications
 - Location of parking Easements North arrow

I hereby certify that the contents of this application are correct and so assume responsibility for all applicable laws, ordinances, codes, and agree to comply with the conditions of this permit. I will contact City Hall for final site approval.

Property Owner/Authorized Designee _____
Print or Type Name _____ Date _____

Amount Paid \$ _____ Rec# _____ C\Ck _____ Date Paid _____

Permit Approved for: Driveway Culvert Sidewalk

By: _____ Date _____

FIRST INSPECTION COMPLETED BY PUBLIC WORKS DEPARTMENT:

Date of Inspection: _____ By: _____

- Location _____
- Grade _____
- Bedding/preparation _____

Additional Comments: _____

FINAL INSPECTION COMPLETED BY PUBLIC WORKS DEPARTMENT:

Date of Inspection: _____ By: _____

1. Sidewalk/driveway/culvert conforms to APW Standards: ___yes ___no
2. Culvert approved for design, materials and workmanship ___yes ___no
3. Final site inspection completed and approved ___yes ___no

Corrections noted: _____

Approved by : _____ Date _____

Title: _____

PERMIT IS VALID FOR ONE YEAR AFTER ISSUANCE