Applicat	ion	#
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City of Kawartha Lakes

Application for the Construction or Modification of a Road Entrance

Owner_ Address Phone Number(s) ___ The Owner may appoint an Agent/Contractor. The City requires that a letter of Authorization from the owner, to Act on behalf of the owner, be issued to the Agent/Contractor and submitted with this application. Agent/Contractor ___ Address Phone Number(s) ___ ☐ Commercial □Field Classification of Entrance:

Residential ☐ Industrial ☐ Agricultural New Entrance? ☐ Yes ☐ No Modification to Existing Entrance? ☐ Yes ☐ No Property Roll Number: ____ Location of Proposed Entrance Lot # _____ Concession # _____ Former Municipality _____ Civic Address: ___ Provide a sketch below of location of proposed entrance. Show entrance proximity to property lines, other entrances, indicate closest cross road (distance to entrance). It is understood that all works will be constructed and/or altered at the expense of the undersigned. Work must not begin before a permit has been issued by the City of Kawartha Lakes. I hereby acknowledge that I (as owner and/or applicant) am responsible for any damages, direct or consequential, arising from any work authorized by the application whether performed directly by the Owner or his/her Contractor, employee, agent or otherwise and agree to indemnify and save harmless the City of Kawartha Lakes from any and all losses, costs or damages in connection with the work being performed. Signature (owner) Date Signature (Agent/Contractor) Office Use Only: ___ Receipt # ______ Property Roll Number ___ Fees: \$_ Application/Inspection(s) Road Damage/non-completion Public Works Signature Date Deposit

Revised May 5, 2017

Deposit Returned Public Works Signature

BUILDING DEPARTMENT	COMMENTS			
Property Zoning: Reason for Entrance is a permitted use: ☐ Yes ☐ No				
Property Located within area regulated by Conservation Authority (Environmentally Protected Area): ☐ Yes ☐ No				
If yes, permit for entrance from Conservation Authority Provided: Yes No				
Additional Comments:				
INITIAL INSPECTION				
Date:	Location:	Application #		
Site Distance:	1	 Measured		
	2			
Site Distance Comment	Direction	Measured		
Signage Required:				
CULVERT: □ Require	d □ Not Required Diame	eter e Coupler		
Length	Type Gage	Coupler		
Ditching Required (Describe nature of drainage improvements required including length, depth, etc.)				
Restoration Required:				
Other Requirements:				
<u> </u>				
□ Approved □	Not Approved			
Reason Not Approved, if applicable:				
Signature:		Date:		
		-		
INSPECTION # 2				
Date:	Location:	Application #		
Contractor's Name, Ad	dress, Phone #:			
Insurance Certificate Re	eceived: Yes Details:			
		Gauge Coupler		
Signature: Date:				
FINAL INSPECTION				
Notes & Comments:				
Signature:		Date:		