

TOWN OF GREAT BARRINGTON

Number _____

Application for Access to Public Way
(to be submitted in triplicate)

Date of application _____

Name of applicant (property owner) _____

Address of applicant (mailing address) _____

Telephone number of applicant _____

Location of proposed highway entrance _____

Contractor _____

Address of contractor _____

Proposed construction date _____

Type of driveway (gravel, asphalt, etc.) _____

Attach an Accurate Drawing of Proposed Highway Entrance

The applicant hereby agrees to notify the Great Barrington Highway Superintendent of the date and time of driveway construction at least 24 hours before construction is begun. The applicant further agrees to conform to all requirements of the Town of Great Barrington regulation of access to public ways (as most recently revised) and to all conditions set forth in the permit.

Applicant's signature _____

Recommendation of Highway Superintendent

I recommend that this application be
() approved () subject to conditions stated on the reverse.
() disapproved for reasons given on the reverse.
() resubmitted with changes suggested on the reverse.

Highway Superintendent's signature _____ Date _____

Permit for Access to Public Way

Permission is hereby granted _____
to () construct or () alter an access to the public way
at _____ as shown on the application
for access to public way dated _____, subject to conditions
stated on the reverse. Date _____

GREAT BARRINGTON BOARD OF SELECTMEN

