

## Driveway Cut Permit Application

Note: This is an application requesting permission for a driveway CUT only – not a driveway  
Submit to Select Board via Town Hall, 118 East St, Mt. Washington, MA 01258

Name of Owner:

Mailing address

Phone Number:

Name and address of Applicant if different than owner:

Location of Property: street address, map and lot

Owner's signature:

Date:

1. Please attach sketch of proposed driveway cut. Include lines of sight with distances as well as any other relevant information (i.e. wetlands, grade).  
Attach any additional documents including maps, diagrams, and engineer or surveyor opinion. The Select Board reserves the right to ask for additional information.
2. Please contact the Highway Foreman at 413 528-2730. The Foreman needs to inspect the site of the driveway cut and sign off on this document. See below.

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I have inspected the proposed location for a driveway cut. The following steps should be taken to insure proper drainage:

- None
- Install culvert size:
- Other:

Highway foreman signature and date:

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Please note that above signature is not approval for the cut. That is determined by the Select Board  
For office use:

Date received:	Date reviewed by Select Board
<input type="checkbox"/> Cut granted	SB Signatures:
<input type="checkbox"/> Cut denied, reason	