## EVANS COUNTY DRIVEWAY APPLICATION

all fields required

| PRE-INSTALLATION  |
|---|
| Date:   |
| Requesting Person (Print Name):   |
| Phone Number of Requestor:  |
| Email Address:  |
| Billing Address (Address, City, State, Zip):  |
| Property Owner Name (if different than above):  |
| Property/Physical Location:   |
| By signing this form I certify that I am authorized to request this service on the above stated property.  Requestor Signature:   |
| Permit Fee: \$100.00  |
| *Your application will NOT be processed until Permit Fee is paid in full.   |
| Permit Fee Received by: Date Received:  |
| Code Department will email form to the Public Works Director  |
| INSTALLATION INSTRUCTIONS   |
| Detailed Installation Instructions from Public Works Director:  |
|   |
| Coordinates of Driveway location:   |
| Public Works Signature: Date:   |
| Public Works Director will email form to the Requestor (email address in top section)   |
| INSTALLATION POST-INSTALLATION CERTIFICATION (INSTALLER/OWNER)  |
| I, the undersigned, hereby certify that the driveway has been installed in accordance with the driveway permit and the Georgia Department of Transportation Road Safety Requirements.   |
| Installer/Owner Signature: Date:  |
| Requestor will email form to the Public Works Director at roads@evanscounty.org   |
| I, the undersigned, have inspected the installed driveway and hereby certify that the driveway has been installed in accordance with the driveway permit and the Georgia Department of Transportation Road Safety Requirements. |
| Public Works Signature: Date:   |
| Public Works Director will email form to the Code Enforcement Admin Clerk   |