



THE UNITED COUNTIES OF LEEDS AND GRENVILLE
REQUEST FOR ENTRANCEWAY PERMIT

Date: _____

Name: _____

Address: _____

Phone: _____ Email: _____

Reason for entranceway request (please attach additional notes/sketches if there is not enough room for remarks): _____

Is the new entranceway related to any new building/severance for property? If yes, attach planning application / documents: Yes [] No []

Form with fields: County Road Number, Civic Address, Lot, Concession, Municipality, Location Property Description, Longitude/Latitude, Residential [], Commercial [], Field [], Other [], Property Zoned as:

Entrance Way Requirements - Width - Normal (Residential): _____
Or Wider (State Width): _____

I hereby confirm that I am aware of the conditions of the granting of this permit for the entranceway as set out in By-Law No. 91-7 and agree to abide by these terms.

I hereby agree to pay the total cost of the proposed entranceway and will submit the required fee when requested to do so.

I hereby acknowledge that an entranceway approval does not indicate that a land severance will be granted.

Signed: _____

OFFICE USE ONLY
Applicant Interview by: _____ Date: _____
Recommended: Yes _____ No _____ Estimated Cost: \$ _____
Remarks: _____
Payment of Fee: \$ _____ Received by: _____