

TOWNSHIP OF READINGTON
APPLICATION FOR DRIVEWAY PERMIT

(Submit in triplicate)

05/27/20

Permit No. _____ Date Fee Paid: _____

Applicant (Print or Type) _____

Present Address _____

Phone Number Where Applicant Can Be Reached _____

Location on Driveway / Road _____ Block _____ Lot _____

Signature _____

Sketch of Proposed Driveway	Elev. (Reference Road)	Profile of Driveway (Min. 50')
	0	10 25(length) 50

Notes to Applicant:

1. Minimum 48 hours' notice required before all inspections.
2. Pavement Specifications – 5” Bit. Conc. Stab. Base Mix I-2 and 2” Bit. Conc. Surface Course Mix I-5.
3. Swales to be regarded on both sides of drive as necessary to assure proper drainage.
4. Driveway Drainage Pipe (if necessary) to be shown on plan and profile.
5. NO FUTURE ALTERATIONS ARE TO BE DONE WITHOUT FIRST OBTAINING A NEW DRIVEWAY PERMIT.

(Do Not Write Below This Line)

	Unacceptable	Not Applicable	Inspector's Initials and Approved Date
Driveway Application	_____	_____	_____
Drainage Pipe	_____	_____	_____
Forms	_____	_____	_____
Subgrade	_____	_____	_____
Blend Base	_____	_____	_____
Asphalt topping or concrete	_____	_____	_____
Final Grading	_____	_____	_____
Drainage Swales	_____	_____	_____
Restoration & Clean-up	_____	_____	_____

Comments: _____

Approved: () Yes () No

Date of Approval: _____ Authorized Signature: _____

- Distribution: 1. Applicant
 2. Township Clerk / Building Inspector
 3. Township Inspector

For Information and / or Inspection
 CALL: (908) 534-1058