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

Profile of Driveway (Min. 50’)

Notes to Applicant:
1. Minimum 48 hours’ notice required before all inspections.
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)

<table>
<thead>
<tr>
<th>Driveway Application</th>
<th>Unacceptable</th>
<th>Not Applicable</th>
<th>Inspector’s Initials and Approved Date</th>
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<tbody>
<tr>
<td>Drainage Pipe</td>
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<td>Forms</td>
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<td>Subgrade</td>
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<td>Blend Base</td>
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<td>Asphalt topping or concrete</td>
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<td>Final Grading</td>
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<td>Drainage Swales</td>
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<td>Restoration &amp; Clean-up</td>
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Comments:____________________________________________________________________

Approved: ( ) Yes ( ) No
Date of Approval:_________________________ Authorized Signature:_____________________

Distribution: 1. Applicant
2. Township Clerk / Building Inspector For Information and / or Inspection CALL: (908) 534-1058
3. Township Inspector