



## Wayne County Engineer's Office

3151 West Old Lincoln Way Wooster Ohio 44691

Phone 330-287-5500

[www.wayne-county-engineer.com](http://www.wayne-county-engineer.com)

Permit # \_\_\_\_\_  
iWorQ # \_\_\_\_\_  
Receipt # \_\_\_\_\_  
**\$50 Fee per lot**

### ACCESS PERMIT APPLICATION

Applicant Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Email: \_\_\_\_\_

**Contractor for the Applicant (if applicable):**

Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Email: \_\_\_\_\_

Access Location / Road Name: \_\_\_\_\_ Township: \_\_\_\_\_

Parcel # \_\_\_\_\_

Type of Driveway: Residential \_\_\_\_\_ Commercial \_\_\_\_\_ Ag \_\_\_\_\_ Other \_\_\_\_\_

Does the property owner own or have any interest in any adjacent property? Yes \_\_\_\_\_ No \_\_\_\_\_

If yes, please describe: \_\_\_\_\_

Are there existing access easements bordering or within the property? Yes \_\_\_\_\_ No \_\_\_\_\_

Describe work to be completed (attach drawing) \_\_\_\_\_

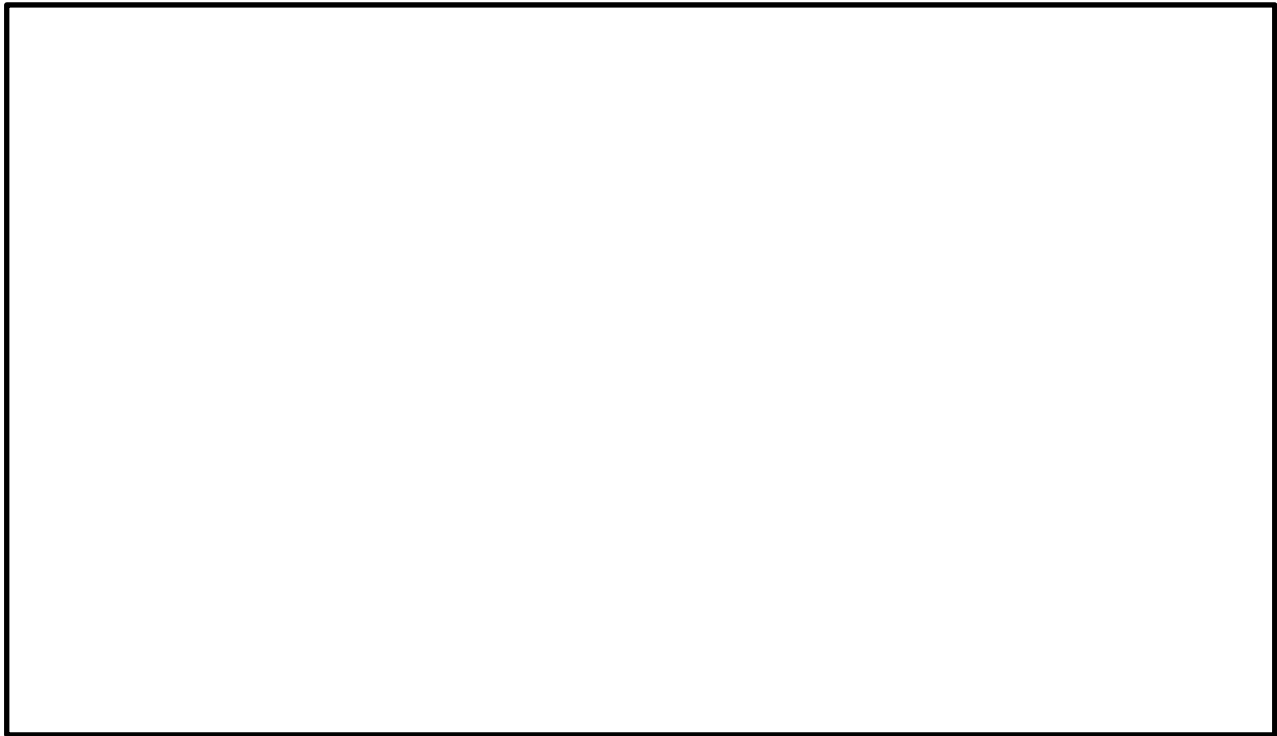
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## Site Plan

*\*Drawings do not need to be to scale\**



1. Show existing and proposed buildings, dwellings and driveway.
2. Include building size, distances to lot lines and distance to road.

### IF THIS PERMIT IS GRANTED, APPLICANTS AGREE TO THE FOLLOWING CONDITIONS:

1. I have reviewed a copy of the policies and regulations stated in the Access Management Regulations for Wayne County, Ohio. If a permit is issued, I agree to comply with all the conditions and regulations stipulated on or attached to the permit. I also understand and agree that failure to comply fully with all conditions and regulations of the permit or any change in the use of the permit inconsistent with its terms and conditions will be considered a violation and cause for suspension, revocation, or annulment of the permit thereby rendering the permit illegal and subject to appropriate action, up to and including removal of the installation at the permittee's expense.

Applicant/Agent \_\_\_\_\_ Date \_\_\_\_\_

### OFFICE USE ONLY

Date Received \_\_\_\_\_ Site Visit \_\_\_\_\_ Approved / Not Approved \_\_\_\_\_  
Inspector \_\_\_\_\_

Normal Traffic Pace:      MPH  
Required Sight Distance      Ft.  
Actual Sight Distance      Ft. Right      Ft. Left

NOTES: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_