

ESTABLISH
ED 1835



Driveway Permit

Includes Private Driveways, and Exclusive Access Driveways

- 18027 Old US 12 • Chelsea, MI 48118 • (734)475-8890 • FAX (734)475-8905
- www.sylvan-township.org

PLEASE PRINT

Type of Permit Requested: *Subject to approval of application submitted to Township Clerk	*Shared Private Drive (SPD) Definition: An easement granted exclusively for private access to no more than three dwellings on separate parcels of land.	*Exclusive Access Driveway (EAD) Definition: An Easement at least 66 feet wide used exclusively by one dwelling to give access across another person's parcel of land.
	Escrow Deposit \$1,050.00 Processing Fee \$125.00 Total \$1,175.00	Escrow Deposit \$850.00 Processing Fee \$75.00 Total \$925.00
Name:		Phone:
		Email:
Property Address:		
Parcel I.D.:		
Application Date:	Total Received: \$ _____ Date _____	
	Escrow Returned: \$ _____ Date _____	
I have provided a plot plan on a professional quality drawing and drawn to a scale of not less than one inch equals 100 feet. See page 4, sect. 10-486 of Ordinance 19-03		Yes _____ No _____
I have provided a copy of the required Easement Agreement, as indicated in Sec. 10-487, page 5 of Ordinance 19-03		Yes _____ No _____
I have provided a copy of the required Maintenance Agreement, as indicated in Sec. 10-487, page 5 of Ordinance 19-03		Yes _____ No _____
I am aware this permit is valid for two years from the date of issuance, and have read in its entirety, Sec. 10-486, item #3 on page 5 of Ordinance 19-03		Yes _____ No _____
I understand the Township Clerk will take time to review this application to confirm all documentation has been adequately provided.	Signature of Applicant:	
	X	
Received by the Township Clerk.	Date:	
Reviewed by the Township Clerk Accepted _____ Not Accepted _____	Signature:	
	Date:	

A copy of Ordinance No. 19-03 is provided with this Permit Application

Location of Work:	Between:	And:

Side of Road: N S E W

Clerk Comments:

AFTER SIGNING, THE FOLLOWING AUTHORITIES CAN PROVIDE AN ADDITIONAL FORM IF NEEDED

ENGINEER USE ONLY

Township Engineer Recommendation and/or comments:

Approved:	Yes _____	No _____	Engineer Signature:
			Date:

ATTORNEY USE ONLY

Township Attorney Recommendation and/or comments:

Approved:	Yes _____	No _____	Attorney Signature:
			Date:

CHELSEA AREA FIRE AUTHORITY USE ONLY

Chelsea Area Fire Authority Recommendation and/or comments:

Approved:	Yes _____	No _____	Fire Chief Signature:
			Date:

SYLVAN TOWNSHIP BOARD OF TRUSTEES USE ONLY

Sylvan Township BOT Recommendation and/or comments:

Approved:	Yes _____	No _____	Clerk Signature:
			BOT Date of Approval: