

**TOWN OF ASHLAND HIGHWAY DEPARTMENT**

**P.O. BOX 129**

**ASHLAND, NY 12407**

**Application for Access from a Town of Ashland Highway**

**Application No.** \_\_\_\_\_

**Date** \_\_\_\_\_

**Town Road Name** \_\_\_\_\_

1. Applicant \_\_\_\_\_

2. Address \_\_\_\_\_

3. Name of Road \_\_\_\_\_

4. Location of Road \_\_\_\_\_

5. Width of Access Requested \_\_\_\_\_ Depth \_\_\_\_\_

6. Work Start Date \_\_\_\_\_ Anticipated Completion Date \_\_\_\_\_

7. Is pavement to be disturbed? \_\_\_\_\_ If so, what type \_\_\_\_\_

8. Reason for Access ( i.e. logging, building ) \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

9. Attach 3 copies of a sketch showing location of work, size of openings, and giving distance to nearest street intersection.

10. State Owner for whom work is being performed:

\_\_\_\_\_

Owner

\_\_\_\_\_

Address

**TOWN OF ASHLAND HIGHWAY DEPARTMENT  
P.O. BOX 129  
ASHLAND, NY 12407**

This application shall be approved by the Town of Ashland Superintendent of Highways prior to any permanent or temporary access from a Town of Ashland Road.

A building permit will not be issued without prior approval of this application.

Culvert will be sized by the Town of Ashland Superintendent of Highways.

“Prior to approval, applicant shall submit a certificate of insurance naming the Town of Ashland as co-insured with coverage in the amount of at least \$500,000.”

Applicant's Signature \_\_\_\_\_ Date \_\_\_\_\_