

KANE BOROUGH
DRIVEWAY AND CURB CUT PERMIT APPLICATION

Name _____

Address _____

Telephone _____

Date of Opening _____

Length of Opening _____

Signature _____ / _____
Date

Approved by _____ / _____
Date

TO BE COMPLETED WITHIN A 30-DAY TIME PERIOD

Work to be completed by _____

NOTE

A 2-INCH LIP MUST BE LEFT FOR DRAINAGE PURPOSES

THE OPENING WILL BE INSPECTED BY BOROUGH PERSONNEL WHEN
COMPLETED

Sketch: