

Town of Apple River
612 Hwy 8
Amery, WI 54001

Driveway Permit Application: Fee: \$50

Date: _____

Applicant Name: _____

Address: _____

Phone Numbers:

Home: _____

Cell: _____

Description of Location - provide road & crossroad information & closest fire number:

First Inspection Date: _____ Inspector Initials. _____

Second Inspection Date: _____ Inspector Initials _____

Third Inspection (if required) Date: _____ Inspector Initials _____

Approved or Exception noted: _____

Driveway to be completed no later than 60 days after first inspection by Inspector.

Return Permit and Fee to : Town of Apple River Clerk
612 Hwy 8
Amery, WI 54001