



**Town of Grafton  
Department of Public Works**

30 Providence Road  
Grafton, Massachusetts 01519  
Phone 508-839-5335 x124  
Fax 508-839-4602

**PHYSICAL ALTERATION & DRIVEWAY PERMIT APPLICATION**

<u>For Office Use Only</u>	( ) Approved	( ) Denied	By: _____
Date of Filing: _____	Fee: ( ) \$75.00	( ) \$225.00	Received By: _____
Good Standing Certificate:	( ) Received	( ) N/A	

This application must be completely filled out upon submittal. No application will be accepted without the applicable permit fee and a valid DigSafe number. It is the applicant's responsibility to provide all the information required. Failure to provide a complete application shall result in automatic rejection and forfeiture of the application fee. Please type or print legibly.

**LOCATION**

House #: _____	Street: _____	Assessor Map/Lot #: _____
Owner Name: _____	Telephone #: _____	
Address: _____		
City/Town: _____	State: _____	Zip Code: _____
Contractor: _____	Telephone #: _____	
Address: _____		
City/Town: _____	State: _____	Zip Code: _____
Applicant Name: _____	Telephone #: _____	
DigSafe Number: _____	Valid From: _____	To: _____
Proposed Construction Dates: From: _____ To: _____		

**DESCRIPTION OF PROPOSED WORK**

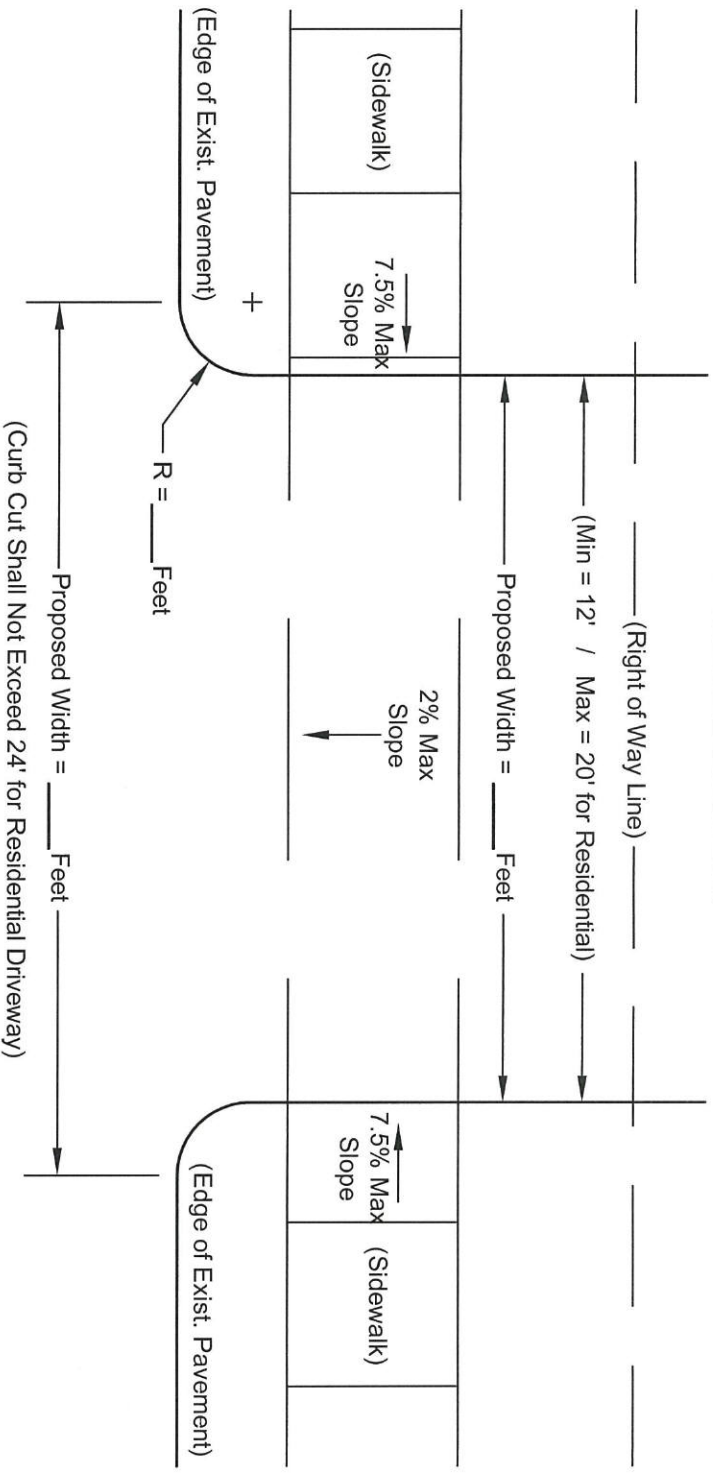
In addition to providing a site plan with the application, please provide the following information:

<input type="checkbox"/> New Residential Driveway <input type="checkbox"/> New Commercial Driveway <input type="checkbox"/> Relocate or Widen Existing <input type="checkbox"/> Regrade and Repave Existing <input type="checkbox"/> Overlay Existing <input type="checkbox"/> Other: _____ _____	<p><u>Check All That Apply For Work Being Done</u></p> <input type="checkbox"/> Tree Removal <input type="checkbox"/> Sidewalk Cut <input type="checkbox"/> Granite Curb Removal <input type="checkbox"/> Asphalt Berm Removal <input type="checkbox"/> Wetland Crossing/Buffer Zone to BVW <input type="checkbox"/> Other: _____
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Driveways must be designed with a positive grade (i.e. uphill) from the roadway to the right of way / property line to the maximum extent practical. All driveways shall mitigate water flow onto the traveled way. While under construction, crushed stone shall be used at the site entrance so that sediment and/or debris is not tracked onto the road. Applicant is responsible for any clean up at the conclusion of each work day.

Please fill in dimensions:

### DRIVEWAY DETAIL



Has the Building Department received copies of the plans depicting the proposed alteration(s)?

Building Dept. Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Is any of the work associated with the proposed access subject to Conservation Commission review?

Conservation Agent Signature: \_\_\_\_\_ Date: \_\_\_\_\_

### CERTIFICATIONS

I hereby certify that I have read and understand the Town of Gratton's **Guidelines for Driveway Access to Roadways and Other Work Within Rights-of-Ways**. I understand that no work is to take place until an approved permit has been issued, and that any change to the approved permit plan is to be approved **in writing** by the Director of Public Works or his authorized agent. Any unauthorized deviation from the approved design plan will result in revocation of the permit, fines, and restoration of any disturbed areas to preconstruction condition.

Signature of Contractor: \_\_\_\_\_ Date: \_\_\_\_\_

Signature of Owner: \_\_\_\_\_ Date: \_\_\_\_\_

Signature of Applicant: \_\_\_\_\_ Date: \_\_\_\_\_  
(If Other Than Above)