

City of Berlin Engineering & Public Works Department
168 Main Street
Berlin, NH 03570
(603) 752-8551



DRIVEWAY/CURB CUT PERMIT APPLICATION

NO WORK is to begin prior to receiving an approved and signed permit from the Berlin Public Works Director. This application must be completed in full at the time of submittal. It is the responsibility of the applicant to provide all information required herein, including a \$10 application fee. Check is to be made to the City of Berlin. Except in the event of a situation posing an immediate threat to public safety, failure to obtain a permit before commencing work will result in the assessment of a fine.

As Landowner(s), I/We hereby agree to the following Conditions:

- A) To bear all costs of construction and materials (Including required drainage systems) necessary to complete the driveway to the City of Berlin's satisfaction.
- B) To hold harmless the City of Berlin and its duly appointed agents and employees against any action for personal injury and/or property damage sustained by reason of exercise of this permit.
- C) To abide by the provisions of the City of Berlin's Driveway Access Regulations on the www.berlinnh.gov website and the specifications below:
 - 1. That the driveway be constructed in the location and with the dimensions as diagrammed in this application.
 - 2. That any change or exception to the diagrammed specifications have written approval of the Public Works Director.
 - 3. That the City of Berlin has the right to remove or correct, at the owners expense, any driveway entrance not built in accordance with a Driveway Permit.

Permit No(to be completed by office): _____ Date of Application: _____

Property Owner (Applicant): _____

Mailing Address: _____

Phone Number: _____

Owner's Email: _____

Work Type: ☐ New Driveway or Opening
☐ Reconstruct and/or Overlay Existing Driveway
☐ Relocate or Widen Existing Driveway
☐ Other

'Other' description: _____

Work Location Address: _____

Property is: ☐ Residential
☐ Commercial or Industrial

From (nearest cross street/Pole #/House #) _____

To (nearest cross street/Pole #/House #) _____

CONTRACTOR INFORMATION

Contractor/Company Name: _____

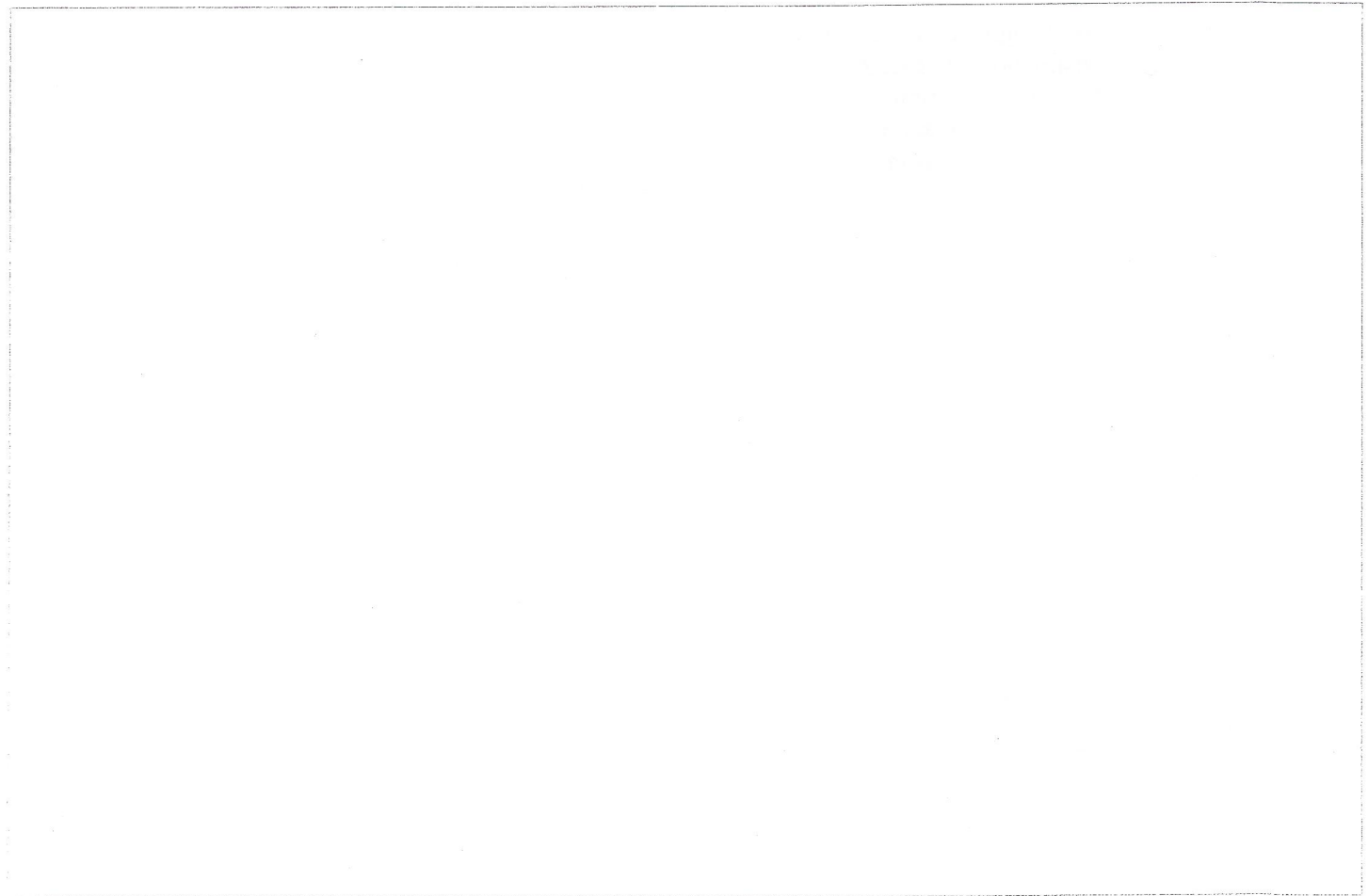
Contact Name: _____

After Hours Emergency Contact Phone Number: _____

WORK DESCRIPTION

Please Diagram the Proposed Driveway with the following information included.

- Existing Driveway Width
- Proposed Driveway Width
- Existing Flare Width
- Width of Road
- Proposed Flare Width
- Existing U shaped driveway
- Existing Curbing
- Existing Sidewalk
- Nearby drainage systems
- On Street Parking Space
- Grade Changes
- Neighboring driveways with dimensions
- Nearby signs, trees, fire hydrants, fences, hedges, etc.
- Nearby Utility Poles



Any other details about the proposed work: _____

Digsafe (if needed) # _____

Digsafe Date Valid: _____

Expected Work Start Date (note that this is for informational purposes only. Work may not begin until a valid permit is issued the the PW Engineering Division): _____

If your permit is approved, how would you like to receive your copy?

- ☐ Email
☐ Fax # _____
☐ Pick up
☐ US Mail

APPLICANT'S SIGNATURE: _____ DATE: _____