



## DRIVEWAY PERMIT APPLICATION

Date of Application: \_\_\_\_\_ Fee: \$50 Receipt: \_\_\_\_\_

Name of owner \_\_\_\_\_ Phone Number \_\_\_\_\_

Owner's Address \_\_\_\_\_  
Address City State Zip

Project Address: \_\_\_\_\_

### CONTRACTOR:

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Phone #: \_\_\_\_\_

### Sketch of Project:

☐ Gravel ☐ Asphalt ☐ Concrete

Please Return To:

Village of Hortonville  
Dept. of Public Works  
P.O. Box 99  
Hortonville, WI 54944

Approved By: \_\_\_\_\_

Date Approved: \_\_\_\_\_