

# APPLICATION FOR DRIVEWAY APRON PERMIT

TOWNSHIP OF GALLOWAY  
PUBLIC WORKS DEPARTMENT  
300 E. JIMMIE LEEDS ROAD  
GALLOWAY, NEW JERSEY 08205  
(609) 652-3700 EXT. 255

DATE \_\_\_\_\_

## APPLICANTS REQUIREMENTS:

1. A detailed diagram must be attached with this permit.
2. Inspections must be set up by appointment 24 hours in advance.
3. All driveways are required to be 14' wide and may be tapered after 6' or property line to 12' wide with a 2" pitch within the first 6' of apron.
4. Driveway must be staked as per plans before pre-preliminary approval. If driveway is not staked out, there will be no inspection.
5. A final driveway inspection must be obtained before a certificate of occupancy will be issued.
6. If County or State road, a permit may be required from such agencies.
7. It is the law to call 1-800-272-1000 before any digging is done.

Name of Applicant \_\_\_\_\_ Phone \_\_\_\_\_

Address of Applicant \_\_\_\_\_

Name & Address of Contractor (if different) \_\_\_\_\_

Location of Driveway \_\_\_\_\_

Block \_\_\_\_\_ Lot \_\_\_\_\_

## INSTALLATION WIDTH:

Asphalt Driveway \_\_\_\_\_  Concrete Driveway \_\_\_\_\_

## INSPECTOR REQUIREMENTS:

Is a 2" Lip Required? \_\_\_\_\_ Is Drainage Required? \_\_\_\_\_

	<b>ASPHALT</b>	<b>CONCRETE</b>
Minimum:	1 Length 20' Solid Pipe 8" Ductile Iron Schedule #50	2 Length 20' Solid Pipe 6" Ads N/12
Apron:	Minimum 2" Thick _____	Minimum 4" Thick _____

## **OFFICIAL USE ONLY**

Permit # \_\_\_\_\_ Fee \_\_\_\_\_

Date Received \_\_\_\_\_ Bond \_\_\_\_\_

## PRE-PRELIMINARY APPROVAL:

Name \_\_\_\_\_ Title \_\_\_\_\_ Date \_\_\_\_\_

## PRELIMINARY APPROVAL:

Name \_\_\_\_\_ Title \_\_\_\_\_ Date \_\_\_\_\_

## FINAL APPROVAL:

Name \_\_\_\_\_ Title \_\_\_\_\_ Date \_\_\_\_\_