

TOWN OF DECATUR  
DRIVEWAY PERMIT

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

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

Reason for request: Construction of \_\_\_\_\_  
Access to: \_\_\_\_\_

Town of Decatur, Section Number \_\_\_\_\_

Location: \_\_\_\_\_

(Name of Town Road)

\_\_\_\_\_ side of the road, \_\_\_\_\_ miles

\_\_\_\_\_ of \_\_\_\_\_

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Road tube and/or ditching requirements: (Must be in place before any construction begins) (specify diameter of tube required and length minimum of 24 feet)

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Driveway or access and road tube requirements approved:

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

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Town Board Official

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Applicant/Agent

Return application and \$10.00 fee to:

Town of Decatur  
P. O. Box 333  
Brodhead, WI 53520-0333

**DRIVEWAY/ACCESS VERIFICATION CERTIFICATION  
GREEN COUNTY, WISCONSIN**

Pursuant to Green County Code section 4-6-1-2:A.6, this form is required to be completed and submitted to the Green County Zoning Department at the time of application for a Zoning or Land Use Permit for projects requiring new or altered use of an access driveway for the premises, or for the construction of any new residential structure. The purpose of this form is to certify that the town has issued a driveway permit, that no driveway permit is required, or the driveway or private road access has been constructed to the proper standard, so Green County Zoning can proceed with the zoning permit application process. This form is not to be considered as the actual driveway permit. Signature(s) on this form must be **original and dated within 90 days** of the date of application. Required attachments for some driveways must also be submitted with this form (see below).

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

Current address: \_\_\_\_\_ Phone: \_\_\_\_\_

Project: \_\_\_\_\_ Construction of: \_\_\_\_\_

\_\_\_\_\_ Other land use: \_\_\_\_\_

Location of proposed driveway/access:

Section \_\_\_\_\_ Town of \_\_\_\_\_ Lot # \_\_\_\_\_ CSM # \_\_\_\_\_

Name of public road to serve as access to the premises: \_\_\_\_\_

Side of road: \_\_\_\_\_

\_\_\_\_\_ feet north east south west of \_\_\_\_\_ (road)

Other information: \_\_\_\_\_

I hereby certify that if the project is for an individual private drive that the applicable Town driveway standards and ordinances have been agreed to. I hereby certify that if the project is for a shared private road, common drive or access easement that the road, drive or access has been constructed to a minimum of eighteen (18) feet of surface roadway and three feet of driveable shoulder and/or the local township standard and/or the State of Wisconsin's Facility Development Manual, whichever is more restrictive. The applicant may proceed with an application for a Zoning Permit for the above project at the above location:

Signature of Town Official: \_\_\_\_\_

Date: \_\_\_\_\_ Title: \_\_\_\_\_

**IN ADDITION:** If access is by County Trunk Highway, a completed County Highway Department Driveway/Access Permit Form **must be attached**.  
If access is by a State Trunk Highway, a completed Wisconsin Department of Transportation Driveway/Access Permit Form **must be attached**.

At the time of zoning permit application, submit this completed form, with required attachments, if any, to Green County Zoning, N3150 Highway 81, Monroe, WI 53566, (608) 328-9423.