

**BERWICK TOWNSHIP, ADAMS COUNTY, PENNSYLVANIA**

85 Municipal Road, Hanover, PA 17331  
Phone: (717) 632-1829 Fax: (717) 632-2280  
Email: office@berwicktp.org  
Website: www.berwicktownship.com

**DRIVEWAY PERMIT APPLICATION**

Permit No. \_\_\_\_\_ Date: \_\_\_\_\_

1) \_\_\_\_\_ Phone No. \_\_\_\_\_  
Name of Applicant

2) \_\_\_\_\_  
Address of Applicant

3) \_\_\_\_\_  
Address of property to be improved Tax Parcel Number

4) \_\_\_\_\_  
Contractor

5) Application is made to:

\_\_\_ Construct a New Driveway \_\_\_ Alter an Existing Driveway \_\_\_ Seal Coat \_\_\_ Top Coat  
\_\_\_ Other (describe): \_\_\_\_\_

Date Work Scheduled to Begin: \_\_\_\_\_

Date Work Scheduled to be Completed: \_\_\_\_\_

**INTENDED USE**

Residential \_\_\_ Commercial \_\_\_ Industrial \_\_\_ Other \_\_\_\_\_

6) Location of proposed driveway

Road Name and No. \_\_\_\_\_

Name of Nearest Intersection \_\_\_\_\_

Distance to Nearest Intersection in Feet \_\_\_\_\_

For the purpose of measuring sight distance, the drivers' eye height shall be 3.50 feet above the proposed access surface and highway pavement surface and the vehicles' height shall be 4.25 feet above the proposed access surface and highway payment surface.

7) Posted Speed Limit \_\_\_\_\_

8) Roadway Sight Distance \_\_\_ ft. Right Roadway Sight Distance \_\_\_ ft. Left

9) Driveway Radius \_\_\_ ft. Right Driveway Radius \_\_\_ ft. Left

Radius (R) of both driveway curves must be at least five feet for cars.

10) Completed Sketch (if required) \_\_\_\_\_

11) Certificate of Insurance \_\_\_\_\_

12) Applicant shall place a stake at the desired location which shall coincide with submitted sketch.

(Description of Work)

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The Applicant hereby agrees to comply with all relevant Ordinances of the Township (i.e. Ord # 37, Ord # 2016-03, Resolution 2016-10) and statutes of the Commonwealth of Pennsylvania, together with all relevant resolutions and regulations promulgated under either.

The Applicant agrees to defend, protect and save harmless the Township and its officers, agents, and employees from any and all loss and liability rising out of any work to be performed pursuant to this permit, and shall fully indemnify the Township, its officers, agents, and employees.

**This application shall be considered as an application only** — it may be considered a township road occupancy permit only at the time the specification of the Township Roadmaster is entered hereon and a complete copy(s) furnished to the applicant.

All work under this permit is to be completed on or before six (6) months from the date of permit issuance. The Township Supervisors, may at any time revoke and annul this permit for nonperformance of, or non-compliance with any of the conditions, restrictions, and regulations hereof.

Signature of Applicant: \_\_\_\_\_ Date: \_\_\_\_\_

Accepted by: \_\_\_\_\_ Date: \_\_\_\_\_  
Permit Officer

Inspected by: \_\_\_\_\_ Date: \_\_\_\_\_  
Road Master

Issued by: \_\_\_\_\_ Date: \_\_\_\_\_  
Permit Officer