

DRIVEWAY APPROACH REQUEST
ACHD CONSTRUCTION DEPARTMENT
FAX # (208) 387-6289 OR E-MAIL TO permits@achdidaho.org

DATE OF APPLICATION	APPROX START DATE	APPROX END DATE
CONTRACTOR/OWNER	PHONE #	CELL #
CONTACT PERSON	E-MAIL ADDRESS	FAX # (TO FAX APPROVAL BACK TO)
STREET NAME/ADDRESS		CROSS STREET
CITY	OWNER (IF DIFFERENT FROM ABOVE)	
	OWNER CONTACT INFO	
DESCRIPTION OF APPROACH W/ATTACHED LAYOUT OF WORK AREA & TRAFFIC CONTROL PLAN		UTILITY <input type="checkbox"/> COMMERCIAL <input type="checkbox"/> INDUSTRIAL <input type="checkbox"/> RESIDENTIAL <input type="checkbox"/> OTHER _____
CONCRETE APPROACH (C / G / SW) _____ LF THROAT WIDTH _____ LF		ASPHALT APPROACH / STREET SURFACING _____ SY

DEVELOPMENT SERVICES

TRAFFIC SERVICES

DATE RECEIVED _____ RECEIVED BY _____ SIGNED _____

_____ APPROVED
 _____ APPROVED WITH AMENDMENTS
 _____ DECLINED

APPROVED DATE _____

DESCRIPTION OF AMENDMENTS/REASON FOR DECLINING

STANDARDS:

1. Max 20' driveway throat width at lot line per ACHD policy.
2. Max 2% cross-slope in sidewalk @ driveway, per Standard Drawing SD-710B or similar.
3. Driveway should be paved their full width at least 30-feet into the site beyond the edge of pavement per Standard Drawing SD-809.
4. Any unused driveways shall be closed with the appropriate curb, gutter and sidewalk per ISPWC Standard Drawings or ACHD Supplemental Drawings.
5. Verify driveway dimensions and location with Inspection staff prior to start of work.

*** Please attach comments and a detailed drawing of proposed project for this submittal. Applications without a detailed drawing will be delayed.

APPROVAL OF THIS REQUEST DOES NOT AUTHORIZE CONSTRUCTION. A PERMIT IS STILL REQUIRED.