Town of Osborn Culvert Application/Permit

The applicant requests permission to place/replace a culvert in location described below in accordance with Town Ordinance and length/diameter stated on permit. Permit is not valid until applicant receives completed form back with Town Signature.

Applicant Information			Owner Information
Applicant Name:			Applicant Name:
Mailing Address:			Mailing Address:
Phone Number:			Phone Number:
Signature:			Signature:
Address or location	n of culvert:		
Tax Parcel Number	::		<u></u>
Is this a temporary	culvert: If	yes, remove by	date:
Type of material co	overing culvert:		-
•		•	inary review. Place stakes on the property so a visual he application before a permit will be issued.
Town Board. The or required on all culv driveway shall slop	culvert must be corrugated verts. If a used culvert is to	steel construct be used it mus road shoulder	vay. All work is to be performed to the approval of the ion and cannot have straight walls. Endwalls are t be approved prior to installation. The surface of the to allow water drainage from the driveway. The work ate.
	F	OR TOWN U	SE ONLY
Check Amount:	Number:	Date:	Payee:
Permission is:	Approved	Denied _	
Explanation:			
Culvert Length ₋			Culvert Diameter
Al Timm, Chairman			Date

Completed Inspection:

Final Inspection Date: _____