

**DRIVEWAY PERMIT
TOWN OF GIBRALTAR
P O Box 850
Fish Creek WI 54212
920-868-1714 Telephone
920-868-9425 Fax Line**

\$45.00

Date: _____

Permit No. _____

(Print Name Here) _____ has filed a registration form in accordance with Gibraltar Town Ordinance 2013-06.

A fee of \$45.00 has been paid on _____.

Authorization is granted to proceed with driveway inspections, on-site and/or by written plan, as deemed necessary by ordinance.

It is understood that inspection(s) will take place at this location listed:

Address to be Inspected:

Fire Number and Road Name: _____

Parcel Number: _____

Owner's Mailing Address:

Phone Number: _____

OFFICE USE

Clerk Acceptance: _____ Date: _____

Date of Inspection(s): _____

Inspection Notes:

