



# Town of Superior

4917 South State Road 35  
Superior WI 54880



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## Application for Private Driveway/Road - Permit

Date of Application: \_\_\_\_\_

Applicant(s)  
(Property Owner(s))

\_\_\_\_\_  
(Name)  
\_\_\_\_\_  
(Address)  
\_\_\_\_\_  
(City/Town), (St) (Zip Code)  
\_\_\_\_\_  
(Telephone Number)

\_\_\_\_\_  
(Name)  
\_\_\_\_\_  
(Address)  
\_\_\_\_\_  
(City/Town), (St) (Zip Code)  
\_\_\_\_\_  
(Telephone Number)

Tax Parcel No. \_\_\_\_\_ Fire # if any: \_\_\_\_\_

Town Road Name: \_\_\_\_\_

Application Permit to construct: \_\_\_\_\_ Private Driveway \_\_\_\_\_ Private Road

Construction Start Date: \_\_\_\_\_ Completion Date: \_\_\_\_\_

Contractor or Person performing construction work:

\_\_\_\_\_  
(Name) \_\_\_\_\_  
(Address) \_\_\_\_\_  
(City/St/Zip) \_\_\_\_\_  
(Phone) \_\_\_\_\_

For Office Use Only

Permit Fee: **\$50.00** Date Received: \_\_\_\_\_ By: \_\_\_\_\_

Initial Inspection : Approved/Disapproved \_\_\_\_\_ Date: \_\_\_\_\_  
(Circle one) (Town of Superior Representative)

Final Inspection : Approved/Disapproved \_\_\_\_\_ Date: \_\_\_\_\_  
(Circle one) (Town of Superior Representative)

**Use back of page for sketch**  
(property lines, driveway placement, town road)