

Application for Driveway Alteration

The Corporation of The City of Cornwall

100 Water Street East, 2nd Floor, P.O. Box 877, Cornwall, ON K6H 5T9 Tel.: (613) 930-2787 www.Cornwall.ca

Project Information		
Address		
Estimated Value \$	Property Use: Residential <input type="checkbox"/> Commercial <input type="checkbox"/>	
Easement on Property Yes <input type="checkbox"/> No <input type="checkbox"/>	Subject to Site Plan Control Agreement Yes <input type="checkbox"/> No <input type="checkbox"/>	
Existing Driveway Information		
Driveway Size (Width) _____ x (Length) _____	Street Opening Width	
Driveway Location	Surface Material	
Proposed Driveway Information		
Driveway Size (Width) _____ x (Length) _____	Street Opening Width	
Driveway Location	Surface Material	
See Attached Plan <input type="checkbox"/>		
Property Owner		
<input type="checkbox"/> Mr <input type="checkbox"/> Mrs. <input type="checkbox"/> Ms First Name	Last Name	
Address		Postal Code
Phone Number	Email Address	Fax Number
Applicant/Contractor for Owner		
<input type="checkbox"/> Mr <input type="checkbox"/> Mrs. <input type="checkbox"/> Ms First Name	Last Name	
Address		Postal Code
Phone Number	Email Address	Fax Number
Declaration of Applicant		
<p>I (name) _____ hereby declare that I will construct the driveway in accordance with the information supplied above and attached site plan and associated documents.</p> <p>Date: _____ Signature: _____</p>		