



**Jackson County Dept. of  
Transportation**  
2400 N. Elm Road  
Jackson, MI 49201  
Phone: 517-788-4230  
Fax: 517-788-4237

**JCDOT USE ONLY**

Date Received: \_\_\_\_\_  
 Amt: \_\_\_\_\_ Received by: \_\_\_\_\_  
 Cash  Check# \_\_\_\_\_  
 Permit Fee \_\_\_\_\_  
 Culvert Fee \_\_\_\_\_  
 Site Plan Fee \_\_\_\_\_  
**Permit #** \_\_\_\_\_

**APPLICATION FOR**

- (  ) **Residential Driveway Permit** (  ) **Farm Driveway Permit**  
 (  ) **Other Service:** \_\_\_\_\_ (  ) **Improve existing (Residential)**

**Explain****New Driveway / Property Location Information**

Address: \_\_\_\_\_ Township: \_\_\_\_\_ Section #: \_\_\_\_\_

Side of Road: N S E W Subdivision: \_\_\_\_\_ Lot #: \_\_\_\_\_

Closest Address / nearest cross road: \_\_\_\_\_

Property Tax Identification #:

\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_

See lower left of your tax statement: (I.E.: 000-07-23-426-00100)

**OWNER / APPLICANT INFORMATION**

Name of Applicant: \_\_\_\_\_ Daytime Phone: \_\_\_\_\_

Mailing Address: \_\_\_\_\_  
Address City State Zip code

Email Address: \_\_\_\_\_ Fax Number: \_\_\_\_\_

**SIGNATURE**

I hereby make application in good faith and give or have secured permission for the Jackson County Department of Transportation to enter the property referenced in this application for the purpose of making an onsite evaluation to determine the suitability of said parcel for construction of an onsite driveway access.

The applicant is responsible for obtaining all other permits required to construct a driveway. These may include but not limited to any permit required by the DEQ. It is the applicant's responsibility to insure that the property is not in a designated wetland. Information is available at: <http://www.mcgi.state.mi.us/wetlands/>

Signature: \_\_\_\_\_ Date: \_\_\_\_/\_\_\_\_/\_\_\_\_ (  ) Owner (  ) Applicant/Agent**ADDITIONAL INFORMATION**

\*Applicant will place two stakes that are available for pick up in the JCDOT headquarters and place them 24' apart to designate the exact desired location of drive and to assist JCDOT personnel in determination of drive requirements.

\*Sight Distance from desired drive shall be a minimum of 100 feet for each 10 miles of legal speed limit (Unless determined by JCDOT)

\*Applicant is responsible for culvert if damaged during property development.

**DRIVEWAY GUIDELINES:**

Driveway Width: 10'-20'  
 Driveway Radii: 10'-15'  
 Driveway Grade: Slope driveway approach  
 away from road at 1/2" per foot to ditch line.

**DRIVEWAY SURFACE:**

If the driveway requires drainage improvement, you will be contacted by the Inspector and a culvert and gravel will be installed by JCDOT Personnel.

# Jackson County Department of Transportation Site Evaluation

## ADDITIONAL INFORMATION (to be filled out by JCDOT)

Drive Culvert Size: \_\_\_\_\_ Drive Culvert Length: \_\_\_\_\_

Grading, tree removal and ditching required: \_\_\_\_\_

Site Distance: \_\_\_\_\_ Speed Limit: \_\_\_\_\_

Superintendent's Comments: \_\_\_\_\_

Recommended for Issuance: \_\_\_\_\_

Approved by: \_\_\_\_\_ Date: \_\_\_\_\_

Temporary Drive:      Approved Date: \_\_\_/\_\_\_/\_\_\_      Bond Paid: \_\_\_/\_\_\_/\_\_\_      Removed: \_\_\_/\_\_\_/\_\_\_

Bond Release:      Amount: \_\_\_\_\_      Date: \_\_\_/\_\_\_/\_\_\_

Bond Retained:      Amount: \_\_\_\_\_      Comments: \_\_\_\_\_

Culvert Installation:      Work Order Sent: \_\_\_/\_\_\_/\_\_\_      Install Date: \_\_\_/\_\_\_/\_\_\_