

PENN TOWNSHIP BOARD OF SUPERVISORS  
228 CLIFFORD ROAD  
SELINGROVE, PA 17870  
Telephone: 570-374-4778 Fax: 570-374-4931

DRIVEWAY PERMIT APPLICATION

Date: \_\_\_\_\_

Fee: \$100

*Fee must accompany this application  
with a sketch plan or plot plan  
indicating the work to be performed.*

Applicant (landowner): \_\_\_\_\_

Telephone: \_\_\_\_\_

Current Address: \_\_\_\_\_

\_\_\_\_\_

Site Address: \_\_\_\_\_

\_\_\_\_\_

Township road driveway will connect to: \_\_\_\_\_

Contractor with contact number: \_\_\_\_\_

All parties acknowledge inspection requirements - Prep Inspection and Final Inspection each with three (3) working days notice to the Township.

Sign and date acknowledgement: \_\_\_\_\_

Actual driveway permit will also include inspection requirements and allow for dates and signatures.

Applicant's Signature:

\_\_\_\_\_

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Reviewed by: \_\_\_\_\_

Fee rec'd: \_\_\_\_\_

Sketch Plan: \_\_\_\_\_