

**City of Box Elder
Planning and Zoning Department**

420 Villa Drive, Box Elder, SD 57719

Phone: 923-1404 Fax: 923-4264 www.boxelder.us

**APPROACH
PERMIT**

Ordinance # 478

Approach must be approved by the Public Works Department prior to the start of work.

Applicant name: _____	Date: _____
Applicant mailing address: _____	
City, state, and zip code: _____	Phone: _____
If applicant is not the property owner :	
Property owner name: _____	Relationship: _____
Owner mailing address: _____	
City, state, and zip code: _____	Phone: _____

Type of approach work:

- | | | |
|---|--|---|
| <input type="checkbox"/> New approach | <input type="checkbox"/> Change in use | <input type="checkbox"/> Temporary access |
| <input type="checkbox"/> Improve existing | <input type="checkbox"/> Relocate existing | <input type="checkbox"/> Remove existing |

Approach Location / Address:

Lot & Block: _____	Subdivision: _____
Section: _____	T 2 3 N, R 8 9 E (Circle #)
Contractor name: _____ Phone: _____	
Contractor mailing address: _____	Local License #
City, state, zip code: _____	
Road to be accessed: _____	Speed limit: _____
Proposed approach width: _____	Distance to nearest cross street: _____
Name of nearest cross street: _____	
Direction of nearest cross street (Circle):	North South East West
Estimated Date of Construction:	

Land Use of Property to be Served:

- | | |
|---|--|
| <input type="checkbox"/> Residential:
Number of single-family dwellings: _____
Number of multi-family dwellings: _____
<input type="checkbox"/> Mobile Home Park: Number of lots: _____
<input type="checkbox"/> Agricultural:
Number of acres served: _____
<input type="checkbox"/> Other: (Describe) _____ | <input type="checkbox"/> Commercial:
Business Type: _____
Number of Employees: _____
<input type="checkbox"/> Industrial:
Average load weight (tons): _____
Load frequency: _____ |
|---|--|

(Continued on Reverse)

This Application form must be accompanied by the following as required:

- A scaled site plan map that indicates the location and dimensions of the proposed approach and conveys the length, diameter, and material of any culvert(s) within the approach.
- A non-refundable Approach Permit Application Fee of \$100.00.
- An additional Late Application Fee of \$200.00 if work begins before Permit issuance.

I, the undersigned, request permission to construct or modify an access approach subject to the rules and regulations of the City of Box Elder and certify that the information submitted is accurate and correct.

Applicant's signature

Print Applicant name

Call 209-3946 and ask for Allen to request inspection once work is completed.

FOR CITY USE ONLY

Date received: _____

Received by: _____

Zoning	Road to be accessed Nearest cross street	Road Classifications	
Current		Current	Future
North			
South			
East			
West			
Comp Plan		Floodplain/floodway <input type="checkbox"/> Yes <input type="checkbox"/> No	
Preliminary Inspection Date:		Inspected by:	
Terms & Conditions of Approval (or Reason for Denial): _____			
<input type="checkbox"/> Culvert required Size: _____ Type: _____			
<input type="checkbox"/> Changes required _____			
Approval Date:		Approved by:	
Start Date:		Date Completed:	
Final Inspection Date:		Inspected by:	