

*Town of*  
***Haverhill, NH***

James R. Morrill Municipal Building  
2975 Dartmouth College Highway  
North Haverhill, NH 03774

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Planning Board  
Telephone: (603) 787- 6800  
Fax: (603) 787-2226

Dear Driveway Permit Applicant:

The form to be completed in order to obtain a driveway permit is attached to this letter. There are several requirements for you to meet and the process involves several steps. You will find these listed below. You **must** complete your application in a timely and legible manner, making sure to attach all of the required information. Failure to do this may result in a delay in the processing of your application.

To make the process more efficient, please check that you have done the following:

1. Entered **all** the information requested.
2. **Printed** all information legibly.
3. Provided your **signature** on the appropriate line.
4. Provided a copy of the tax map with your lot identified on it.
5. Indicated on this map the approximate location of the proposed driveway.
6. Entered complete and accurate information
7. Put stakes into the ground to mark the proposed location. This needs to be done **prior** to the Road Agent reviewing your application.

Please give the **completed** application to the staff in the Selectboard Office. They will forward it to the Road Agent. If he deems it necessary, he may request a meeting with the applicant at the site. You may also request such a meeting.

You have **one year** from the date of the approval of the application to complete the driveway. If you require more time, you must re-apply with the road agent for an extension of the permit.

Thank you,  
The Planning Board

## Driveway Permit Application

Please Print Legibly Using Blue or Black Pen

**Note: By regulation, a driveway may not serve more than one parcel of land**

In accordance with NH RSA 236:13V, permission is hereby requested from the Haverhill Planning Board or its agent to construct a driveway entrance to my property, described as Tax Map # \_\_\_\_\_, Lot # \_\_\_\_\_, on the \_\_\_\_\_ side of \_\_\_\_\_ Street/Drive/Road/Lane ( choose the appropriate one) at a location and in a manner which will meet the Haverhill Driveway Standards. The driveway requested is for access to my \_\_\_\_\_.(Choose one: residence, industry, business, subdivision, other.)

### **Landowner/Applicant Responsibilities**

1. Provide a copy of the Tax Map with the Lot Number identified. Please mark the location of the proposed driveway on this map.
2. Place stakes on both sides of the proposed driveway entrance.
3. Construct driveway entrance only for the *bona fide* purpose of securing access to private property so that the driveway land within 10 feet of the traveled way is used for no purpose other than travel.
4. Construct the driveway entrance at the permitted location in accordance with Town of Haverhill Standards.
5. Hold harmless the Town of Haverhill and its duly appointed agents and employees against any action or for personal injury and/or property damage sustained by reason of this permit.
6. Furnish and install the drain structures and other improvements necessary to maintain existing highway drainage and adequately handle increased runoff resulting from this driveway.
7. Bear the costs of engineering consultation that may be needed by the Town of Haverhill in granting this permit.
8. Notify the Road Agent of the Town of Haverhill upon completion of this driveway. The telephone number to reach the Road Agent is 787-6107.

### **Certification of Information:**

Print Name of Applicant: \_\_\_\_\_ Date: \_\_\_\_\_

Signature of Applicant: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

\_\_\_\_\_

Telephone: \_\_\_\_\_ E-Mail Address: \_\_\_\_\_

**REVIEW AND RECOMMENDATIONS:**

**To Be Filled Out by the Road Agent Only:**

Description of driveway location in relation to property lines, road intersections, or other landmarks.

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Requirements and/or Recommendations for this driveway ( include sight distance, drainage, etc.):

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**Road Agent's Recommendation for Approval or Disapproval of this Driveway Permit Application:**

\_\_\_\_\_ Recommend *approval* of this application with the conditions set forth above.

\_\_\_\_\_ Recommend *disapproval* of this application with the conditions set forth above.

\_\_\_\_\_

Date

\_\_\_\_\_  
Signature of Road Agent  
Town of Haverhill

The completed driveway was reviewed by the Road Agent on \_\_\_\_\_

\_\_\_\_\_  
Signature of Road Agent  
Town of Haverhill

*This permit expires one calendar year from the date of issue as noted above.*

Town of Haverhill, New Hampshire

Driveway Permit Application Addendum

If applicable, please read and sign the following statement if you, as the owner, designate an agent to act on your behalf in regard to the proposed driveway.

I designate the person listed below as my agent for the purpose of procuring the necessary driveway permit for the proposed attached application as described herein. Representations made by my agent may be accepted as though made by me personally, and I understand that I am bound by an official decision made on the basis of such representations.

Agent Name:

\_\_\_\_\_

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

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

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_  
Signature of Property

\_\_\_\_\_  
Date

Owner

*Attach this form to your driveway application if necessary*