

**TOWN OF ORANGE
P.O. BOX 233
EAST BARRE, VT 05649
(802) 479-2673**

HIGHWAY ACCESS PERMIT APPLICATION

Applicant Name: _____

Address: _____

Phone Number: _____

The location of this work (Town Highway #, distance to nearest intersection and which side of the road) _____

Description of the work to be performed.

Date work is expected to begin:

Applicant _____ Date _____

Applicant _____ Date _____

PERMIT APPROVAL

This permit is issued with the following directions, restrictions and conditions and covers only the work described hereinafter and then only when the work described is performed as directed and subject to the following special conditions.

Selectboard Chairman

Date