HEARD COUNTY DRIVEWAY PERMIT APPLICATION

Please include a check or money order (paid to: BOC) for $40.00 and prepaid self-addressed envelope

Please Return all to P.O. Box 397 Franklin, Ga. 30217

Date: _____ Permit #: _____

Applicant's Name: _____

Mailing Address: _____

Contact Number: _____

Location of Proposed Driveway: (Note: Location must be flagged by owner)

_____

_____

_____

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Approved: _____ Pipe Size: _____

Disapproved: _____ Required: _____

Reason for Disapproval and Recommended Remedy:

_____

_____

_____

By: _____ Date: _____

Title: _____