Logan County Zoning Office

529 S Mclean Street
Lincoln, Illinois 62656

Phone: 217-732-4773
Email: zoning@logancountyil.gov

APPLICATION FOR A PRIVATE ACCESS PERMIT

Owner Name: _____
Address: _____
_____
Phone: _____
Email: _____

Road Name: _____
Address (If Applicable): _____
Parcel Number: _____
Township: _____

Owner Information:

Owner Name: _____

Address: _____

_____

Phone: _____

Property Information:

Road Name: _____

Address (If Available): _____

Parcel Identification Number: _____

Township: _____

Attach Site Plan Showing the Location of the Private Access

Distance in feet from entrance to nearest cross road/intersection: _____

I, _____ , being the local official in charge of approving Private Access Permits at the above noted property, indicate that I have reviewed and approved this application for a Private Access Permit.

Authorizing Agent: _____

Title: _____