

ORILLIA CITY CENTRE
50 ANDREW STREET S., SUITE 300
ORILLIA, ONT. L3V 7T5
TELEPHONE: (705) 325-1311
FACSIMILE: (705) 325-5178



MUNICIPAL OPERATIONS CENTRE
20 JAMES STREET W.
ORILLIA, ONT. L3V 6Y3

TELEPHONE: (705) 326-4585
FACSIMILE: (705) 326-3373

**ENVIRONMENTAL SERVICES AND
OPERATIONS DEPARTMENT
ACCESS PERMIT**

Permit Number _____

Applicant: _____

Registered Property Owner: _____

I, _____ (registered property owner) give the
Applicant, _____ consent to conduct business on my behalf
regarding the above mentioned property

Applicant's Address: _____

Applicant's Postal Code: _____

Applicant's Phone Number: _____

Registered Owner's Phone Number: _____

Subject Property Address: _____

Current Zoning: _____

Check one or more of the following to indicate proposed work:

- Construct an access
- Change the design of the existing access
- Change location of existing access
- Construct a temporary access
- Use an existing access for other than its original or present use
(from residential to commercial)

Classification, Use, Purpose, and Detail of Access

Access required for:

_____ Temporary _____ Date access will be removed (mm/dd/yy)

_____ Commercial _____ Residential _____ Industrial

_____ Number of Existing Accesses

_____ Proposed Access Surface (asphalt, concrete, interlock brick). All accesses shall be surfaced from the edge of roadway up to property line.

Contractor that will be installing access _____

Contractor's contact number _____

(City Use Only)

Requirements

Yes No Traffic Impact Study Required

Yes No Access Analysis Required

Yes No Culvert Installation Required

_____ Size of Culvert Required (diameter in mm, length in m)

Yes No Curb Cuts Required

Yes No Sidewalk Replacement/Upgrade Required

_____ Number of Sidewalk Panels to be Replaced

Yes No Vegetation/Tree Trimming/Removal Required

_____ Abutting Roadway Classification

All costs associated with the approval and installation of the access shall be borne by the applicant. These costs may include costs for the construction or alteration of an access such as labour and materials for the access itself, alteration to the roadway, utilities, traffic control devices, layout and surveying of the access, legal costs, preparation of plans, etc. For the purpose of clarity, work performed by the City or a City approved contractor shall be at the expense of the applicant.

Date: _____

Applicant's Signature: _____

Permit Fee: \$75.00

Paid (mm/dd/yy): _____

Please draw a sketch (with dimensions) of the location of proposed access. Show access in proximity to existing buildings, driveways, roads, etc.,.



Applicant is responsible for staking proposed access in the field for City staff to review.

APPROVAL SIGNATURE: _____ TITLE: Transportation Technologist/Parking DATE: _____

APPROVAL SIGNATURE: _____ TITLE: Superintendent of Roads & Fleet DATE: _____

APPROVAL SIGNATURE: _____ TITLE: Manager of Source Protection & Operations DATE: _____

Note: Permit is valid for one (1) year from time of Approval Date