



106 Dorman Street

Harrington, DE 19952

(302) 398-3530

DATE \_\_\_\_\_

PERMIT NO. \_\_\_\_\_

**DRIVEWAY PERMIT APPLICATION**

Property Owner: \_\_\_\_\_

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

Property Owner Phone/Email: \_\_\_\_\_

Map/Parcel: \_\_\_\_\_

Zoning: \_\_\_\_\_

Contractor Name: \_\_\_\_\_

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

Contractor Phone/Email: \_\_\_\_\_

City of Harrington Contractor License No. \_\_\_\_\_

Type of Driveway:

(Check One) Asphalt: \_\_\_\_\_ Concrete: \_\_\_\_\_ Other (Please List): \_\_\_\_\_

Size: \_\_\_\_\_

**Estimated Cost of Project: \$** \_\_\_\_\_

**Applicant's Certification:** By completing this application, the applicant hereby certifies as follows under penalty of perjury: (1) I am the owner of record of the named property, or that the proposed work is authorized by the owner of record and that I have been authorized to by the owner to make this application as their agent; (2) That the information on this application (and construction documents) provides full disclosure and is accurate to the fullest extent possible; and (3) That the information contained in the application and construction documents is in compliance with all applicable covenants or deed restrictions.

Applicant's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Applicant Printed Name: \_\_\_\_\_

**Office Use Only**

Building Official \_\_\_\_\_ Date \_\_\_\_\_

Permit Fee \$ \_\_\_\_\_