**APPLICATION FOR MINIMUM USE DRIVEWAY**

A Minimum Use Driveway Is A Residential Or Other Driveway Which Is Expected To Be Used By Not More Than 25 Vehicles Per Day (i.e. 50 A.D.T.)

**SEE PUBLICATION 312 GUIDE**

**APPLICANT/PROPERTY OWNER**

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>ADDRESS</td>
<td></td>
</tr>
<tr>
<td>POST OFFICE</td>
<td>ZIP CODE</td>
</tr>
<tr>
<td>PHONE</td>
<td>FEE</td>
</tr>
</tbody>
</table>

**LOCATION OF PROPOSED DRIVEWAY**

<table>
<thead>
<tr>
<th>County</th>
<th>Municipality</th>
<th>Route No.</th>
<th>Name of Nearest Intersection</th>
<th>Distance to Nearest Intersection in Feet</th>
</tr>
</thead>
</table>

*If a valid email address is provided, the driveway permit will be sent via email; otherwise it will be sent via standard US mail.*

**APPLICATION IS MADE TO**

- [ ] CONSTRUCT A NEW DRIVEWAY
- [ ] ALTER AN EXISTING DRIVEWAY

**DATE WORK SCHEDULED TO BEGIN**

**DATE WORK SCHEDULED TO BE COMPLETED**

**FOR DEPARTMENT USE ONLY**

- Application Received By:
  - Date:
  - Notes:

- Center Line
- Indicate North
  - Use Arrow

- Roadway Sight Distance
  - FT
  - Angle of Sight
  - 90°

- Area to Be Clear of View Obstructions
  - Ft

- Vehicle Turnaround
  - Driveway Radius
    - Ft
  - Driveway Width
    - Ft

- Roadway
  - Shoulder
  - S. R.
  - Segment
  - Offset

- Signature
  - Date

Is any portion of the property reserved for a person with a disability or a severely disabled veteran? 
- YES
- NO

Under and subject to all the conditions, restrictions and regulations prescribed by the Pennsylvania Department of Transportation and on the issued Permit, Form M-94SP.

The applicant certifies that all statements contained herein are true and correct.

By X ____________________________
  SIGNATURE

Visit our website at: www.dct.state.pa.us