

# Tom Green County Driveway Access Permit

DATE: \_\_\_\_\_

OWNER'S NAME: \_\_\_\_\_  
(Last) (First) (Middle)

MAILING ADDRESS: \_\_\_\_\_

TELEPHONE NUMBER:

HOME \_\_\_\_\_

CELL \_\_\_\_\_

WORK \_\_\_\_\_

You will be contacted within three business days.

SITE ADDRESS (911): \_\_\_\_\_

PRECINCT NUMBER: 1 2 3 4

IS THIS SITE IN A SUBDIVISION? YES \_\_\_\_\_ NO \_\_\_\_\_

IF YES, SUBDIVISION NAME

\_\_\_\_\_

SECTION \_\_\_\_\_ BLOCK \_\_\_\_\_ LOT \_\_\_\_\_

IF OTHER THAN SUBDIVISION: ACREAGE \_\_\_\_\_ SURVEY \_\_\_\_\_

NATURE OF PROPOSED CONSTRUCTION: RESIDENTIAL \_\_\_\_\_ COMMERCIAL \_\_\_\_\_

IF COMMERCIAL \_\_\_\_\_  
(NAME AND TYPE OF BUSINESS)

RECEIPT No.: \_\_\_\_\_

Approved \_\_\_\_\_

SIGNATURE

DATE

**Permit is valid for one year from date of application or upon approval of Precinct Commissioner or designee whichever occurs first.**