

**KEOKUK COUNTY HIGHWAY DEPARTMENT  
ENTRANCE/DRIVEWAY PERMIT**

**(1) Applicant Information**

(a) Name: \_\_\_\_\_

(b) Address: \_\_\_\_\_

(c) City/St/Zip: \_\_\_\_\_

Permit paid (date) \_\_\_\_\_ Check # \_\_\_\_\_

CMP paid (date) \_\_\_\_\_ Amount \_\_\_\_\_

Check # \_\_\_\_\_

(d) Requesting \_\_\_\_\_ New Entrance permit  
\_\_\_\_\_ widening permit

Phone # \_\_\_\_\_

Cell # \_\_\_\_\_

**(2) Entrance location**

(a) E911 Address/Street \_\_\_\_\_

(b) Section \_\_\_\_\_ Township \_\_\_\_\_ Range \_\_\_\_\_ Township Name \_\_\_\_\_

(c) Side of road N / S / E / W

(d) Additional directions: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Attach sketch or copy of map depicting location.

County will provide applicant with flagging for marking exact location of proposed entrance/driveway.

\_\_\_\_\_ Pink flag

**(3) Ownership Status**

(a) Does the permit applicant own the land to be served by the entrance YES NO

(b) If applicant not owner \_\_\_\_\_ Contract Buyer \_\_\_\_\_ Renter \_\_\_\_\_ Plan to purchase

List name of actual land owner \_\_\_\_\_

(c) Will this entrance serve more than one property? YES NO

**(4) Entrance Details**

(a) New Entrance What **top** width is requested? \_\_\_\_\_ ft.

(b) Entrance Widening Entrance's existing width? \_\_\_\_\_ ft.

What additional **top** width is requested? \_\_\_\_\_ ft.

Or What additional **width** of pipe requested? \_\_\_\_\_ ft.

(c) Special request items: \_\_\_\_\_  
\_\_\_\_\_

**(5) Signature**

The undersigned requests a permit for the entrance described above and agrees to comply with the requirements of the Keokuk County Entrance/Driveway Policy and terms of the permit, when issued.

\_\_\_\_\_  
Name

\_\_\_\_\_  
Date

**KEOKUK COUNTY HIGHWAY DEPARTMENT**  
**Entrance/Highway Worksheet**

(This worksheet is to be filled in by Keokuk County Highway Department.)

Road Surface: \_\_\_\_\_

Functional Classification: \_\_\_\_\_

Average Vehicles per Day: \_\_\_\_\_

**(1) Entrance Location**

- |                                     |   |     |    |
|-------------------------------------|---|-----|----|
| (a) Sight Distance                  | Actual sight distance Right _____ ft.<br>Available at site Left _____ ft. | YES | NO |
| (b) Offset from Public Roads        | _____ ft from nearest intersection  | YES | NO |
| (c) Offset from Drainage Structures | _____ ft from nearest bridge<br>_____ ft from nearest culver > 60" 0      | YES | NO |
| (d) Minimum separation              | _____ ft between nearest entrance   | YES | NO |

**(2) Design**

- |                           |                    |    |
|---------------------------|--------------------|----|
| (a) Width/Crown/Alignment | YES                | NO |
| (b) Fore' slope Ratio     | _____ : 1 Required |    |

**(3) Culvert**

- |                      |  |     |    |
|----------------------|--|-----|----|
| Is culvert required? | Drainage Area _____ acres                              | YES | NO |
|                      | Topography Mtns Hilly Rolling Flat                     |     |    |
|                      | Pipe size required _____ in diameter x _____ feet long |     |    |

Notes: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_