

**Exhibit A**  
**ACCESS APPROACH ROAD CONSTRUCTION APPLICATION AND PERMIT**

**COLUMBIA COUNTY ROAD DEPARTMENT**  
**1054 OREGON STREET, ST. HELENS, OR 97051**  
**PHONE: (503)397-5090 FAX: (503)397-7215**

**A. APPLICATION**

Permit Fee: **\$50.00**

Receipt #: \_\_\_\_\_

PERMIT NUMBER: \_\_\_\_\_

Permit Expires: \_\_\_\_\_

**Applicant Name** (*please print*) \_\_\_\_\_

declares that he/she is the owner or sanctioned by owner of the real property adjoining the public road, private road or driveway at the location described herein and has the lawful authority to apply for this Permit. When approved, a Permit is subject to the terms and provisions of Columbia County Ordinance No. 2006-4, and Exhibit B Specifications.

**NOTE: Access permit must be issued prior to obtaining a building permit. Access construction must be completed to specified standards within the time period allowed before a building inspector can approve the final inspection for occupancy or issue a Certificate of Occupancy. If access construction cannot be completed and the applicant is otherwise eligible for a final inspection and/or Certificate of Occupancy, a deposit of \$2,000 may be made as security for future construction. The deposit will be forfeited if the access is not completed within the required time. Applicant must notify County Road Department of any change in address to insure return of deposit.**

**Access Required is:**     Permanent     Temporary     Low Usage

**Road Name:** \_\_\_\_\_ **12-digit Property Tax Account No.** \_\_\_\_\_  
**Township, Range, Section, Parcel** \_\_\_\_\_

**Side of Road:**         North         South         East         West

**Between/Near Landmarks (attach map or sketch):** \_\_\_\_\_

**Property Owner's Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Mailing Address:** \_\_\_\_\_

**City:** \_\_\_\_\_ **State:** \_\_\_\_\_ **Zip:** \_\_\_\_\_ **Phone:** \_\_\_\_\_

**B. PERMIT:** Location must be approved prior to beginning construction.

<b>THIS SECTION TO BE COMPLETED BY COLUMBIA COUNTY ROAD DEPARTMENT</b>		
Insurance required? Yes <input type="checkbox"/> No <input type="checkbox"/>		
Sight distance adequate? Yes <input type="checkbox"/> No <input type="checkbox"/> If no, explain: _____		
Culvert required? Yes <input type="checkbox"/> No <input type="checkbox"/> Size: _____ Length: _____ Distance from edge of road: _____		
Dimensions of access apron if different than standard (Section IV & E): _____		
Paving to a distance of 20' from edge of public/private road or driveway required? Yes <input type="checkbox"/> No <input type="checkbox"/>		
Water diversion required on access apron? Yes <input type="checkbox"/> No <input type="checkbox"/>		
Special comments: _____		
<b>ACCESS LOCATION APPROVED BY:</b> _____ <b>Date:</b> _____ <b>Title:</b> _____		
<input type="checkbox"/> Copy mailed to applicant on _____ <input type="checkbox"/> Faxed to LDS on _____ <input type="checkbox"/> Faxed to District Supervisor on _____		
<b>CONSTRUCTION APPROVED BY:</b> _____ <b>Date:</b> _____ <b>Title:</b> _____		
<input type="checkbox"/> Copy mailed to applicant on _____ <input type="checkbox"/> Faxed to LDS on _____ <input type="checkbox"/> Faxed to Finance Dept (if necessary) on _____		

<input type="checkbox"/> Final Inspection authorized with \$2,000 deposit on (Date): _____ by (Signature of Road Dept. Official): _____
<input type="checkbox"/> Faxed to LDS on _____ <input type="checkbox"/> Faxed to Finance on _____
<input type="checkbox"/> Extension of time granted to (Date): _____ on (Date): _____ by (Signature of Road Dept. Official): _____
<input type="checkbox"/> Faxed to LDS on _____