

# HEARD COUNTY DRIVEWAY PERMIT APPLICATION

**\*Please include check or money order for \$25.00 and a Prepaid self addressed envelope\***

**\*Please Return all to P.O. Box 40 Franklin GA, 30217**  
No. \_\_\_\_\_

Date: \_\_\_\_\_

Applicant's Name: \_\_\_\_\_

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

Contact Number: \_\_\_\_\_

Location of Proposed Driveway: (Note: Location must be flagged by owner)  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_



Approved: \_\_\_\_\_

Pipe Size

Disapproved: \_\_\_\_\_

Required: \_\_\_\_\_

Reason for Disapproval and Recommended Remedy:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

By: \_\_\_\_\_ Date: \_\_\_\_\_

Title: \_\_\_\_\_