



Walton County Public Works Division

PERMIT# _____

APPLICATION FOR OPENING UNIMPROVED RIGHT-OF-WAYS

<i>PLEASE PRINT</i>	
Applicants Information	
Applicant Name: _____	Date: _____
Mailing Address: _____	
Email: _____	Phone: _____
Contact Information of person/s responsible for cleared right-of-way	
Name: _____	Phone: _____
Address: _____	
Boundaries of Proposed Clearing	
Detailed Description of Proposed Clearing	
Please check (✓) if submitted or received:	
<input type="checkbox"/> Detailed plans depicting all desired clearing provided.	<input type="checkbox"/> Received copy of Right-of-Way Policy
Clearing within the right-of-way must meet all applicable sections of the Walton County Right-of-Way Policy	
THIS PERMIT IS SUBJECT TO CONDITIONS PERMIT CLOSE OUT SECTION	
Upon approval, permission is hereby granted to proceed with the proposed clearing as noted above. Applicant shall notify Walton County Public Works at (850) 892-8108 (48) hours prior to the work commencing.	
Applicants Signature: _____	Date: _____
FOR INTERNAL USE ONLY	
<input type="checkbox"/> Approved Date: _____	<input type="checkbox"/> Disapproved Date: _____
Reviewed By: _____	Approved By: _____