2024-____

SALISBURY

TOWN OF SALISBURY (WARD 3)
CROSSWAY CULVERT REPLACEMENT APPLICATION

OWNER / APPLICANT	
Name:	Date:
Company Name:	
Address:	
Phone No.:	Email:

LOCATION OF PROPERTY
Address:

TYPE OF DRIVEWAY (check appropriate box)					
Residential		Commercial		Industrial	

DO NOT MARK BELOW THIS AREA

FOR OFFICE USE ONLY:					
EXISTING CROSSWAY CONDITIONS (check all that apply)					
Heaved over pipe		Poor upstream drainage		Separation of pipe joints	
Depressed over pipe		Poor downstream drainage		Precast concrete pipe	
Asphalt surface		Inlet headwall		Corrugated metal pipe	
Concrete surface		Outlet headwall		Corrugated plastic pipe	
Chipseal surface		Inlet erosion protection		Undersized pipe diameter	
Gravel surface		Outlet erosion protection		Conforms to By-Law No. 33-3	

SKETCH	CORRECTIVE ACTION
	Approved Yes ☐ No ☐ Comments: Signature: Date:

- Only those locations which conform to the requirements of By-Law 33-3 will be considered for approval.
- Each application will undergo a site evaluation by the Town of Salisbury Infrastructure & Public Works Department for approval and determination of work to be carried out.
- Headwalls constructed by previous or current property owners will not be reinstated by the of Salisbury as part of a culvert replacement.

SIGNED:_____ DATE:_____

OWNER/APPLICANT