



Residential Access Management Permit



_____ Township

Knox County, Ohio

Applicant Information:

Property Owner Name: _____

Phone Number: _____ Email: _____

Mailing Address: Street _____

City _____ State _____ Zip Code _____

Site Information:

Road Name/Number: _____

Brief Location of Driveway: _____

NOTE: Applicant must have driveway staked or marked prior to inspection.

Distance to Nearest Intersection: _____

Culvert Requirements: Diameter of Pipe: _____ Length of Pipe: _____

Inspection Notes: _____

OUPS Notification: It is understood that the culvert will be placed by the property owner, lessee, or contractor. The applicant must notify the Ohio Utilities Protection Service (OUPS) two (2) days before the pipe is installed.
CALL OUPS BEFORE YOU DIG 1-800-362-2764

Signature of Applicant: _____ Date: _____

Date of Inspection: _____ Field Inspector: _____

Please send to: Knox County Tax Map Department Fax: (740) 397-2723
117 East High Street, Suite 131 Phone: (740) 393-6752
Mount Vernon, OH 43050 Email: mapdepartment@co.knox.oh.us