



**TOWN OF ELEANOR
Drainage Permit Application**

Property Owners Name: _____ **Date:** _____

Owners Mailing Address: _____ **Phone:** _____

Street Address: _____

Is the new culvert pipe replacing an existing culvert pipe? _____

Diameter of new culvert pipe: _____ **Diameter of old culvert pipe** _____

Where is culvert pipe being installed? _____

Contractor's Name: _____

Contractor's Address: _____ **Phone:** _____

Does contractor have Eleanor Municipal License? _____

Date work is to begin: _____

Owners Signature: _____

Office Use Only

Pipe size to be used in accordance to Engineer: _____

Inspected By: _____ **Date:** _____

Approved By: _____ **Date:** _____