

**TOWN OF WARWICK
PAVING ESCROW APPLICATION**

Date _____

Application #: **P** _____

Permit No. _____

Application is hereby made to the Building Department for the issuance of a Driveway Paving Bond pursuant to the issuance of the Certificate of Occupancy. The applicant agrees to comply with all applicable laws, ordinances and regulations.

Before a C/O is issued: this form must be completed and returned to the Building Department office with the correct bond amount.

***SHOULD DRIVEWAY NOT BE PAVED WITHIN ONE YEAR FROM DATE OF PAVING DEPOSIT – THE TOWN OF WARWICK HAS THE RIGHT TO PAVE DRIVEWAY OR HAVE THE DRIVEWAY PAVED.**

ALL DRIVEWAYS REQUIRE MINIMUM 25' PAVING FROM ROADWAY INCLUDING STATE & COUNTY

SITE DATA:

Address Location: _____ Sec-Blk-Lot:: _____ - _____ - _____

OWNER:

Name: _____

Mailing Address: _____

City: _____ State: _____ Zip Code: _____

Phones: _____ Mobile: _____

CHECKLIST:

_____ Provide check in the amount of \$3,000 **OR** if driveway is over 10% grade the price to pave entire driveway, to be refunded to the owner after satisfactory completion of work and approval by the BUILDING DEPARTMENT/DPW.

POSTED BY:

Name: _____

Mailing Address: _____

City: _____ State: _____ Zip Code: _____

(who the money will be returned to)

AUTHORIZATION:

State of New York,

County of _____, _____ being duly sworn deposes and says he is the owner and is duly authorized to perform or have performed said work and to make and file this application; that all statements are true and to the best of his knowledge and belief, and that the work will be performed in the manner set forth in the application and in the plans and specifications filed therewith.

Sworn to before me

this _____ day of _____ 200__

Notary Public: _____

Owner Signature: _____

Print Name: _____

AMOUNT RECEIVED:

\$ _____ By: _____

FOR TOWN USE ONLY

Monies Bond Received By: _____ Amount: _____ Date: _____

DPW Final Driveway Inspection: Pass: _____ Fail: _____ Inspector: _____ Date: _____

Comments: _____
