

TOWN OF BRUSLY

CULVERT PERMIT

Date: _____ No: _____

Name: _____

Address: _____

Telephone: _____

Type of Installation _____ Driveway _____ Single _____ Other

Other (explain) _____

Type of culvert to be used: _____ Concrete _____ Corrugated

Other (explain) _____

Location: (Subdivision, Street, Highway, etc.) _____

Note: (If located on state highway-a state permit must be obtained)

**USE SPACE ON BACK OF SHEET FOR DIAGRAM OR
DRAWING IF NEEDED.**

Additional Instructions- Information: _____

INSPECTORS SIGNATURE

APPLICANTS SIGNATURE

(SPACES BELOW FOR PARISH USE ONLY)

Date installed _____ Culvert Diameter _____

Total length Installed _____

Fax to W.B.R. Police Jury 336-1840