



TOWN OF BUCKLAND

17 State Street

Shelburne Falls, MA 01370

Phone: 413-625-6330 ext. 1

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adminassist@town.buckland.ma.us

July 13, 2021

Mr. Stephen Bracket
118 Elm Street
Shelburne Falls, MA 01370

Dear Mr. Bracket:

Enclosed is a copy of your Curb Cut Application. Your permit has been granted and the work that was outlined in your application may begin. Once the work is complete, please notify the Town so that we may inspect the work and issue the final sign-off by the Selectboard.

This permit is under the direct inspection of the Highway Superintendent, and he will inspect the project during and after construction. He shall have the authority to halt construction and/or prohibit access to said driveway if construction is not in accordance with the approved plan until objectionable conditions are corrected.

Please let me know if you have any questions or concerns.

Sincerely,

Pam Guyette
Administrative Assistant

cc: Steve Daby, Highway Superintendent

TOWN OF BUCKLAND
APPLICATION FOR CURB CUT PERMIT

PURPOSE: To provide better protection of public safety through the orderly control of traffic entering and exiting a public way and to provide the necessary grade and drainage to protect the public way from damage.

APPLICATION INFORMATION:

Applicant: Stephen Bracket

Applicant Address: 118 Elm St, Buckland

Applicant Telephone Number: 413-270-4595

Contractor (if any): Pantermehl Land Clearing

Contractor Address: PO Box 371, 1427 Big Hill Rd
Ashfield MA 01330

Contractor Telephone Number: 413-628-4777

Road on Which Curb Cut to be Made: 118 Elm St, Buckland

Description of Work: Installation of new driveway,
approximately 12 ft wide and 100 ft long.
Driveway will be composed of compacted
gravel.

see proposed site plan

Anticipated Start Date: July 8th (estimated)

Anticipated Completion Date: 2-4 days after

You MUST:

1) Submit a plan for any driveway that is to be created, altered, or closed, and the relationship to the access public way. Construction details are described under Section 5, Design Standards below. Attach a drawing/plan of the proposed curb cut or driveway and any necessary construction details. The curb cut and/or driveway must be designed in accordance with the provisions attached to this application. Any other information deemed necessary or applicable in the judgment of the Building Inspector or Highway Superintendent.

2) Receive written approval BEFORE BEGINNING ANY WORK. Any person who effectively creates or causes to be created, a curb cut without such authorization, may be subject to a fine or \$100.00 per day following certified notice, and is liable for damages and cost of repair, and must restore the area to its' original condition. Approval or denial must be rendered within forty (40) days of the submission/ acceptance date of the request. Incomplete applications do not initiate this deadline.

REVIEW OF APPLICATION:

Application must be submitted to: Board of Selectmen, Town of Buckland, 17 State Street, Shelburne Falls, Massachusetts 01370

Please submit one original and three copies of this application.

Must be signed at time of application.

I have read the attached Curb Cut Policy and agree to abide by them when implementing and maintaining the above-referenced project. I understand that the driveway shall be designed and must receive approval from the Board of Selectmen before a building permit for a newly constructed building is approved and the driveway construction shall be completed before any occupancy or use of the premises is permitted.

Applicant's Signature: _____

Date: 6/29/21

The Board of Selectmen must notify the Applicant making the application within twenty-one (21) days, in writing, indicating whether the application is approved or not. The Highway Superintendent shall consult with the Police Chief and the Fire Chief and other interested Town Officials to obtain their comments on the curb cut.

Reviewed by:

Highway Superintendent: _____

Fire Chief: _____ 7/7/21

Police Chief: _____ 7/12/21

The Board of Selectmen shall "sign off" on the permit after satisfactory completion of the construction.

Signatures of Buckland Board of Selectmen

Date: _____

If approved:

Date Permit Released: _____