



COMMUNITY SERVICES DEPARTMENT

12002 Hwy 6, Santa Fe, TX 77510

PO Box 950

Phone (409) 925-6412

www.ci.santa-fe.tx.us

permits@santafetx.gov

Culverts

Applicant Name:	Applicant Mailing Address:
Phone:	E-mail Address:
Property Address:	Nearest Cross Street(s):
Property Tax ID:	Lot Size:
New or Existing Driveway: (circle one) New Existing	
Existing Driveway Width:	Additional Width Requested: Minimum of 20 Ft, Not to exceed 60ft
Size of Culverts:	Location of Culverts:
Type of Use: (circle one) Residential or Commercial	
Comments/Recommendations of the City:	
Notice: Location of culverts must be clearly marked with stakes or paint by permittee. Texas Once Call requires 48 hours' notice to properly mark the ditches for utilities, etc. The Santa Fe Street Dept will be notified once culverts are delivered to the address listed above and Texas One Call has completed line locates. Entrances shall have a minimum width of 20ft. Open bar ditches of City streets shall not be closed in an amount greater than 40% of the lot or tract frontage with along any given street or 60 ft, whichever is less, to preserve existing storm water detention capacity throughout the community. Culvert sizes and configurations shall be approved by the City of Santa Fe Streets Superintendent. Approved inlets shall be installed no less than 32 ft intervals.	
Residential Culvert Cost: \$25.00 per foot Commercial Culvert Cost: \$50.00 per foot By issuance of this permit, the City of Santa Fe, Texas does not assume any responsibility for the replacement of bulwarks, concrete paving, asphalt paving or other paving installed by permittee in connection with the driveway over the culvert in the event adjustments to the culvert become necessary. I hereby certify that I have read and examined this application and know the same to be true and correct. All provisions of laws and ordinances governing this type of work will be complied with whether specific herein or not. The permittee agrees to the above by signing this application. _____ Applicant Signature _____ Date	For Office Use Only: Permit Number: _____ Permit Cost: _____ Cash/Check/Card Received By: _____ Review Completed: _____ Identification #: _____ Time: _____ Locate By Date: _____

This form may be emailed or submitted in person.