



# NEIGHBOR CONSENT FORM – DRIVEWAY RED ZONE

Please complete all sections in this form and present it to your neighbor for signature. Please refer to the zone specifications included in your invoice to complete Section 3. Please email or mail a copy to the Curb Access Program. Contact information is at the bottom of this form.

### SECTION 1: APPLICANT

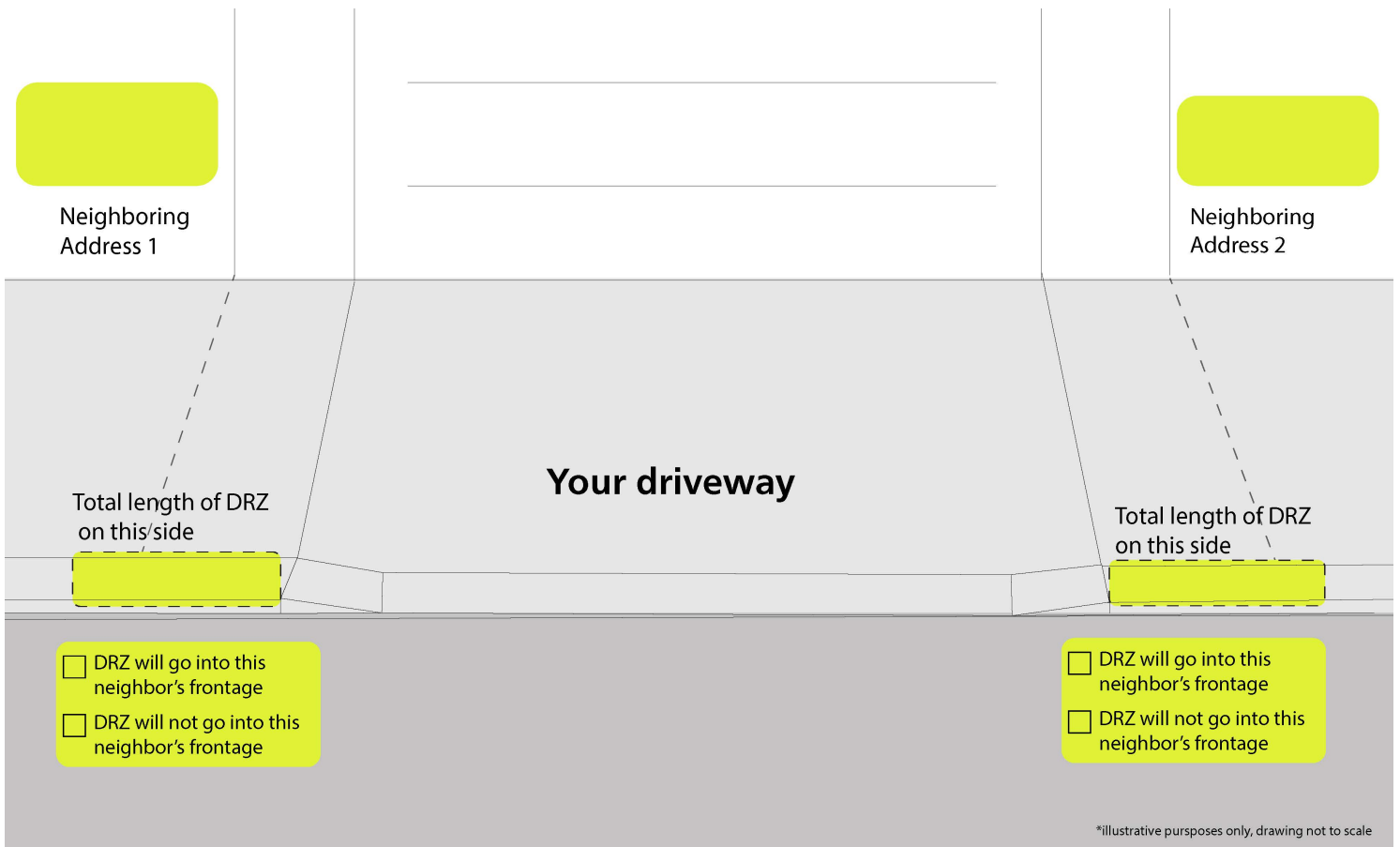
NAME: \_\_\_\_\_ ADDRESS: \_\_\_\_\_

### SECTION 2: NEIGHBOR

NAME: \_\_\_\_\_ ADDRESS: \_\_\_\_\_ Email / Phone Number: \_\_\_\_\_

### SECTION 3: PROPOSED DRIVEWAY RED ZONE

Please review the diagram which describes the proposed red zone and identify which portion of the red zone will encroach into your frontage.



I understand that after the red curb is painted, it will encroach onto my property frontage. I acknowledge this condition and confirm that I understand the proposed work and do not object to the installation of the red curb as described. This letter serves as my written consent in support of the request as described here within.

Neighbor's Signature: \_\_\_\_\_

Date: \_\_\_\_\_