Right-of-Way Access/Driveway Application #75297

Wednesday, March 4, 2026 8:34 AM

Checklist:

____Address
____Drive/ROW
____Septic
____Site Use Approved
____Docs Reviewed/Accepted
____Application Submitted
____Zoning Review
____Plans Reviewed
____Required Inspections Assigned
____Invoiced
____Legal Lot of Record
____Flood Zone
____FDEP Needed

APPLICANT: JAMES WARREN **PHONE:** (863) 206-5370

ADDRESS:

OWNER: CARMAN WALTER W, CARMAN NANCY L **PHONE:** (518) 424-9623

ADDRESS: 154 SW HARRINGTON GLN LAKE CITY, FL 32024

PARCEL ID: 15-4S-16-03023-001 **SUBDIVISION:**

LOT: **BLOCK:** **PHASE:** **UNIT:** **ACRES:** 3.93

CONTRACTOR	TYPE	LIC#	BUSINESS NAME
BOLAND, MICHEAL	Air Conditioner	CAC1817716	ACE OF OCALA
BOLAND MICHAEL	Electrician	ES-12000926	ACE AC AND ELECTRICAL
DAVID ALBRIGHT	General	IH1129420	DAVID ALBRIGHT MOBILE HOME SVC LLC

ROW ACCESS DETAILS	
Is the access for commercial or residential use?	Residential
Is this permit for an existing driveway? Choose no if applying for a new driveway permit.	Yes
Type of connection for access road	Verify Existing Drive
Type of construction of property	Mobile Home
If the type of construction is not listed, please describe below	
If the type of construction will contain units or lots, please enter the number of units or lots below	
Normal vehicle usage:	Automobiles
Estimated Number of Vehicle trips per day	2

Review Notes: *A DRIVEWAY APPLICATION MUST BE SUBMITTED, REVIEWED, AND APPROVED PRIOR TO THE ISSUANCE OF A 911 ADDRESS OR ANY BUILDING PERMIT. PLEASE USE THE LINK IN THIS EMAIL TO COMPLETE AND SUBMIT THE APPLICATION. THIS REQUIREMENT APPLIES EVEN IF A DRIVEWAY ALREADY EXISTS—IF SO, PLEASE SELECT "VERIFY EXISTING."