

**APPLICATION AND PERMIT**

to construct, operate, maintain, use and/or  
remove within a county road right-of-way

**PERMIT #**

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**BOARD OF COUNTY ROAD COMMISSIONERS of MANISTEE County, Michigan**

**ADDRESS: 8946 CHIPPEWA HWY BEAR LAKE MI 49614**

**PHONE: 231-889-0000**

**FAX: 231-889-0011**

If applicant hires a contractor to perform the work, BOTH must complete this form and BOTH assume responsibility for the provisions of this Application and Permit.

APPLICANT	CONTRACTOR
NAME: _____	NAME: _____
MAILING ADDRESS: _____	MAILING ADDRESS: _____
PHONE NO.: _____	PHONE NO.: _____
FAX NO.: _____	FAX NO.: _____

Applicant's Signature Title _____ Date: _____	Contractor's Signature Title _____

FINANCIAL REQUIREMENTS	ATTACHMENTS REQUIRED
Permit Fee _____	Plans and Specs. _____
Receipt Number _____	Bond Yes <input type="checkbox"/>
Dated _____	Bond Amount \$ _____
Check Number (If applicable) _____	Insurance Yes <input type="checkbox"/>

**APPLICATION**

Applicant and/or Contractor request a Permit for the purpose indicated in the attached plans and specifications at the following location:

CITY \_\_\_\_\_ or TOWNSHIP \_\_\_\_\_ Sec. No. \_\_\_\_\_

NAME OF ROAD \_\_\_\_\_ between \_\_\_\_\_

for a period beginning \_\_\_\_\_ and ending \_\_\_\_\_

and agrees to the terms of the permit.

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**PERMIT**

A permit is granted in accordance with the foregoing application for the period stated above, subject to the following terms agreed to by the Permit Holder. When Applicant hires a Contractor the "Permit Holder" is the Applicant and the Contractor.

RECOMMENDED FOR ISSUANCE:

\_\_\_\_\_ Investigator

\_\_\_\_\_ Date \_\_\_\_\_ Title \_\_\_\_\_

**BOARD OF COUNTY ROAD COMMISSIONERS  
MANISTEE COUNTY, MICHIGAN**

ROBERT RISHEL, Chairman	SALLY RECKOW, VICE CHAIR
ANNIE HOOGHART, Member	JIM RUSSELL., Member
RICHARD GRAHAM, Member	