GRATIOT COUNTY ROAD COMMISSION



200 COMMERCE DRIVE - P.O. BOX 187 ITHACA, MI 48847-0187 PHONE: 989-875-3811 FAX: 989-875-2831



Right of Way Permit

TO CONSTRUCT, OPERATE, MAINTAIN, USE AND/OR REMOVE WITHIN A COUNTY RIGHT-OF-WAY

Permit Fee
Deposit
Other
Receipt Number

Permit Number

Dri	iveway	Road Crossing	Other	r	
	Ар	plicant		Contractor	
Name:			Name:		
Address:			Address:		
City:			City:		
State			State:		
Zip:			Zip:		
Phone:			Phone:		
Fax:			Fax:		
Email: .			 Email:		
Application					
Township:		Route:			
Between:			and		
Distance/direction from nearest intersection:					
_	FT	E W	N S	of	
For a Period E	Beginning		and ending		
Description of Work to be done:					
By signing this permit application, I certify that I have read and will abide by the rules and regulations on the back of this sheet.					
Authorized Sign		Title		Date	
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 by the Board of Gratiot County Road Commissioners, Gratiot County, MI					
AGENCY CON	TACT INFORMATION				
Permit Section_		Phone:	Fax:	Email:	