Village of Breedsville

82 E. Main St. PO Box 152 Breedsville, MI 49027

Village of Breedsville Drive-Way Permit

PERMIT NO.____

<u>Applicant</u>	Contractor
Name:	Name:
Current Mailing Address:	Current Address
Telephone:	Telephone:
Fax:	Fax:
Email:	Email:
Signature:	Signature:
APPLICATION Applicant and/or Contractor request a Permit for the ourpose indicated in the attached plans and specifications at the following location:	 Must Be Included with Permit Application Insurance of Contractor Bond, if applicable obtained by contractor Fee(s) \$25.00
/illage: Road Na	ame:
Nearest cross-street (s)	
Describe what you plan to accomplish:	
— A permit is granted in accordance with the foregoing applic	ERMIT Cation for the period stated above, subject to the Requirements and hereto for the purpose of obtaining a Driveway. When the contractor assume responsibility.
	OFFICE USE ONLY
	Date Permit Mailed: Date Permit Faxed: Permit NO: BY:
Permit Issued by:	
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