



APPLICATION AND PERMIT

CRA100

to construct, operate, maintain use and/or remove
within a County road right-of-way
BOARD OF COUNTY ROAD COMMISSIONERS OF
St. Clair County, Michigan
21 Airport Drive, St. Clair, MI 48079-1404
PH: (810) 364-5720
Fax: (810) 966-2548

PERMIT NUMBER

ISSUANCE DATE:

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: _____

TELEPHONE: _____

TELEPHONE #: _____

APPLICANT SIGNATURE: X _____

CONTRACTOR SIGNATURE: X _____

TITLE: _____ DATE: _____

TITLE: _____ DATE: _____

(FOR OFFICE USE ONLY) FINANCIAL REQUIREMENTS

ATTACHMENTS REQUIRED

PERMIT FEE: \$ _____

PLANS AND SPECS. (PLEASE CHECK IF APPLICABLE) PLANS

EST. INSPECTION FEE: \$ _____

SPECS

BOND: \$ _____

BOND NUMBER IF APPLICABLE: _____

DEPOSIT: \$ _____

PROOF OF INSURANCE: _____

LETTER OF CREDIT: \$ _____

TO BE BILLED: \$ _____

OTHER: _____

APPLICATION

APPLICANT AND/OR CONTRACTOR REQUEST A PERMIT FOR THE PURPOSE INDICATED IN THE ATTACHED PLANS AND SPECIFICATIONS AT THE FOLLOWING LOCATION:

CITY: _____ TOWNSHIP: _____ SECTION: _____

ROAD NAME: _____ BETWEEN: _____ AND: _____

FOR A PERIOD BEGINNING: _____ AND ENDING: _____

AND AGREES TO THE TERMS OF THE PERMIT. DESCRIBE THE PROJECT IN THE SPACE PROVIDED BELOW.

PROJECT:

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: _____

Approved By: _____

Date: _____

BOARD OF COUNTY ROAD COMMISSIONERS
ST. CLAIR COUNTY, MICHIGAN