

APPLICATION FOR PERMIT

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

If an applicant hires a contractor to perform the work, the contractor information below must be filled out. Applicant and contractor assume responsibility for the provision of this application and permit.

APPLICANT

NAME:
MAILING ADDRESS:
CITY, STATE, ZIP:
TELEPHONE: _____ Email: _____ FAX: _____

CONTRACTOR

NAME:
MAILING ADDRESS:
CITY, STATE, ZIP:
TELEPHONE: _____ Email: _____ FAX: _____

PERMIT LOCATION

Township: _____ Parcel Number: _____
Name of Road: _____ Which side of road? N S E W
Between (closest road): _____ and _____

Approximately how far from nearest road?

Permit Type: **Residential** **Farm Field** **Commercial** **Utility** **Public/Private Road** **Other:**

Driveway Surface Type (check one): Gravel Bituminous Concrete

Planned start date: _____ Planned completion date _____

Permits will be issued within seven (7) business days from the day all necessary permit applications, accompanying documents, flags and markers placed, and permit fees are paid. Permit may be picked up, mailed, or faxed to the applicant. By signing below, the applicant and/or their contractor acknowledge receipt of the General and Supplemental Permit Specifications and agree to abide by them and any requirements shown on the approved permit. Construction may not begin until an approved permit has been issued.

Applicant Signature: _____ Date: _____

Contractor Signature: _____ Date: _____

FOR ICRC OFFICE USE ONLY:

Notes:

Permit fee: _____ To be billed: _____ Other: _____
Date: _____ Bond: _____ Application number: _____
Receipt #: _____ Deposit: _____ Inspected by: _____