



FOR CITY USE ONLY	
ISSUANCE DATE _____	
PERMIT FEE _____	PAID _____

**City of Boyne City Application and Permit
For Work Within the Public Right of Way, Easement or on City Property**

APPLICATION

PERMIT LOCATION/OR STREET ADDRESS _____

START DATE _____ **END DATE** _____

TYPE OF WORK (Check One)

- Water Sanitary Sewer Drainage/Grading Gas Electric Phone/CATV
 Driveway Sidewalk Other: _____
DESCRIPTION OF WORK Sketch/Drawing is attached

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

Applicant (please print)

Name: _____
Address: _____
City: _____ State: _____
Phone: _____ Email: _____
Signature: _____
Title: _____ Date: _____

Contractor (if different than applicant)

Name: _____
Address: _____
City: _____ State: _____
Phone: _____ Email: _____
Signature: _____
Title: _____ Date: _____

Applicant and/or Contractor requests a permit for the purpose indicated herein and/or on the attached plans and specifications and agrees to the terms of the permit. It is understood that all activity resulting from the granting of this permit is to be performed in accordance with all specifications and conditions referred to or included hereon and any Attachment for additional requirements. It is further understood that in the event any facility covered under this Permit interferes with any future use of the right-of-way for highway purposes, the Permit Holders, at his/her expense, will move or remove the facility at the direction of the City Commission.

PERMIT

A PERMIT is granted in accordance with the foregoing for the period stated on the previous page, subject to the following conditions agreed to by the Permit Holder. When applicant hires a Contractor the "Permit Holder" is both the Applicant and the Contractor.

PERMIT CONDITIONS:

(See Attachment for Additional Requirements)

Permit Fee \$25.00

Approved by: _____ Date: _____

Authorized Representative for City of Boyne City

Submit Application to Becky Pennington Deputy Clerk

City of Boyne City, 319 N Lake Street, Boyne City, MI 49712 or bpennington@boynecity.com

If you have questions please call Becky @ 231.582.0341