Road:	Township:	Section:	Applicant	Per	rmit #	
		SHIAWASSEE COUNTY ROA 01 WEST CORUNNA AVENUE, CORU PHONE: (989) 743-2228 FA EMAIL: GENERALMAIL@SHIA	AD COMMISSION NNA, MICHIGAN 48817-1229 AX: (989) 743-5008	.ОАСН		
Applicant:						
Nam Phone #:	e Fax #:_	Address	Ci _ Email:	ity/State	Zip Code	
Location (road name):	on the North South East West side of the road. Between					
and		(Check O	,	earest Intersection)		
			Tom (iii	and the section,		
Applicant Signature:		Date the proposed (new) Driveway will be clearly staked:				
Contractor:						
Phone #:	Name	Address		City/State	Zip Code	
applicant will be resp Permanent headwall All culverts within t approval of the Shian	consible for proper installation. Als at culvert ends are not permitted the right-of-way must be N-12 duwassee County Road Commission.	G BEFORE INSTALLING CULVI l work in connection with the above lal wall plastic or corrugated metal See "Use of Alternate Materials" in Goods ags or yard areas will not be permitted	e mentioned driveway approach I. <u>Alternate materials includi</u> General Requirements handbook.	n is to be performed by the ng concrete pipe may also	e applicant or contractor. Description be used with separate	
The applicant will pa	y for all damages to the roadway o	n account of the driveway installation arising out of any improper installation	n and shall save the Board of C			
1 0	is granted for the period commencing and ending					
Minimum Culvert Size Residential Remarks:		. Culvert type shall bommercial	be corrugated metal or corrugated	d smooth interior plastic pipe	e.	
APPROVED			DISAPPROVED			
		(DATE)			(DATE)	