



INGHAM COUNTY ROAD DEPARTMENT DRIVEWAY APPLICATION

THIS BOX IS FOR ICRD USE ONLY	
APP#:	PERMIT FEE:
RECEIPT#:	CULVERT FEE:
PERMIT FEES ARE CALCULATED PER DRIVEWAY ENTRANCE	

Ingham County Road Department - 301 BUSH ST - MASON MI 48854 - PH: 517-676-9722 - Email - permits@ingham.org

COMMERCIAL - \$150
 RESIDENTIAL - \$50
 FIELD ACCESS DRIVE - \$50

Application and permit to construct, use, and maintain a driveway approach to an Ingham County Road. If the 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:	
CITY/ST/ZIP:		CITY/ST/ZIP:	
PHONE:		PHONE:	
EMAIL:		EMAIL:	
SIGNATURE:		SIGNATURE:	
TITLE:	DATE:	TITLE:	DATE:

The above named applicant hereby makes application for a permit to construct a driveway approach within the right-of-way of:

Address:	City/St:	Zip:
----------	----------	------

Exact location/Nearest Crossroads:

TOWNSHIP:	SECTION:	Parcel ID if known: 33-
-----------	----------	-------------------------

Proposed driveway width at R/W line:		Driveway surface type:	Parcel frontage: ft.
--------------------------------------	--	------------------------	---------------------------

Describe below what modification is being proposed, new build, etc. **DRIVEWAY MUST BE STAKED PRIOR TO INSPECTION**

Notes:

The above stated intentions shall be carried out in the manner applied for and in accordance with plans, specifications, maps, and statements filed with the Road Department as part of this application. If said permit is granted, the above named applicant agrees to meet all requirements of the Road Department's standard specifications, supplemental specifications, and conditions set forth on the reverse side of this application and permit.

FIELD INSPECTION: DO NOT WRITE BELOW THIS LINE

Road Surface:	Curb:	Curb Cut:	Proposed Driveway Surface:
Ditch:	Culvert Required:	Dimensions: X	Obstructions:

Remarks:

Inspector:	Date:
------------	-------

NOTES:

CULVERT INSTALLATION INFORMATION - Date of Request/Payment:

CULVERT SIZE INSTALLED:	DATE OF INSTALLATION:
-------------------------	-----------------------