IONIA COUNTY ROAD COMMISSION 169 E. Riverside Drive; P.O. Box 76, Ionia MI 48846 (616) 527-1700 (office) or (616) 527-8848 (fax)

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. BOTH applicant and contractor assume responsibility for the provision of this application and permit.

			<u>APPLIC</u>	<u>CANT</u>						
NAME:										
MAILING ADDRESS:										
CITY, STATE, ZIP:										
TELEPHONE:		FAX:								
			CONTRA	ACTOR						
NAME:										
MAILING ADDRESS:										
CITY, STATE, ZIP:										
TELEPHONE:	FAX:									
			PERMIT L	OCATIO	N					
Township:	Section Number									
Name of Road:					Which side of	of road?	Ν	S	E	W
Between (closest road):			and							
Approximately how far fro	om nearest r	oad?								
Permit Type (circle one):	Residential	Farm Field	Commercial	Public/F	Private Road	Other:				
Driveway Surface Type (check one): Gravel			Bituminous			Concrete				
Planned start date:	Planned completion date									
Permits will be issued wind mailed or faxed to the appearant Supplemental Permit cannot begin until an appropriate the cannot be supplementation to the cannot be supplementa	pplicant. By Specification	signing belo	w, the applica e to abide ther	nt and/o	r their contra	ctor ackn	owled	ge rece	eipt of	the General
Applicant Signature:			Date:							
Contractor Signatur	Date:									
FOR ICRC OFFICE USE		******	*******	******	*******	*****	*****	******	******	******
Notes:										

Permit fee: To be billed: Other: Date: Bond:

Application number: Receipt #: Deposit: Inspected by:

IONIA COUNTY ROAD COMMISSION STANDARD PLANS

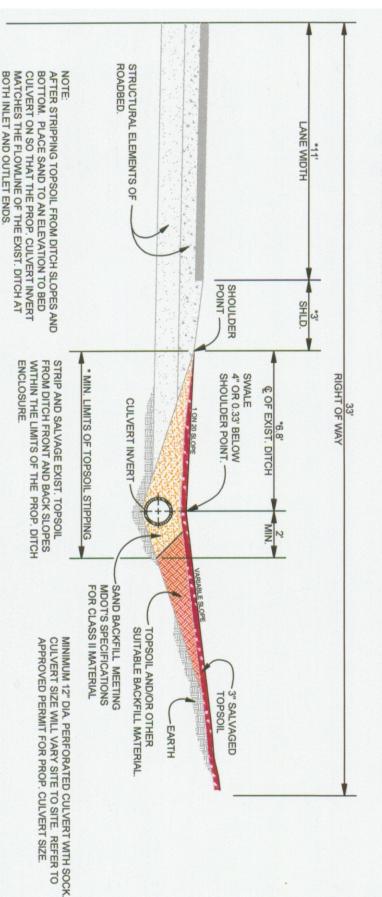
DITCH ENCLOSURE

FOR

CROSS-SECTION OF DITCH ENCLOSURE

NOT TO SCALE

* DENOTES DIMENSION VARIES SITE TO SITE



IONIA COUNTY ROAD COMMISSION STANDARD PLANS

FOR

DITCH ENCLOSURES

SHEET 2 OF 3

PLAN OF DITCH ENCLOSURE

SCALE: 1" = 30"

