

FEE: \$35.00

## APPLICATION FOR EXCAVATION WITHIN STREETS, ALLEYS, SIDEWALKS, AND PUBLIC RIGHT-OF-WAY WITHIN THE CITY OF WHITE CLOUD

Applicant Signature Da	Applicant Signature	Date
	opsoil, seed, and fertilizer. Topsoil shall s and elevations existing before disturban er seeding.	-
	damaged property/services including but nes, electric lines, storm pipes, sidewalk	
8. Attach a sketch showing the location, charac	cter and dimensions of the proposed excavation o	r opening.
7. Project start date:	Project end date:	
6. Size and location of work:		
5. Description of work to be executed.		
5. Description of work to be executed:		
4. Purpose of excavation:		
3. Surface type for street or sidewalk:		
Liability Insurance Carrier:  2. Address of property involved:	Phone:	
E-mail:		
Phone:	Phone:	
Address:		
Name:	Name:	
1. <u>Applicant Information</u> : (If not individual, list	business) <u>Owner Information</u> : (If differ	ent than applicant)
DATE:		

Phone: (231) 689-1194

Fax: (231) 689-2001

Email: Clerk@CityofWhitecloud.org



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	UTILITIES	<b>CHECKED BELOW WE</b>	RE IDENTIFII	ED & MARKED ACCO	ORDINGLY AT T	HE WORK LOCATION	
Electri	cal *******	Water ************************************	Sewer ******	Gas ********	******	Communications	****
( )	Granted	Reasons/Conditions:					
( ) !	Denied	Reason(s):					
D	Pate:		DPW Super	rvisor, City of White	Cloud		
Сору [	Distribution:	Original - City of Whit	te Cloud	Copies: Applicant,	DPW, Property	y File	

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