

## **Address Permit Application**

Village of Dryden • 5602 Main Street • Dryden, MI 48428 Phone: 810.796.2291 • Fax: 810.796.3618

## **Owner/Applicant Information**

Please complete and provide all information.

Owne	er Name		Agent Name
Owne	er Address		Agent Address
City/S	State/Zip		City/State/Zip
Drive	ers License No		Date of Birth
		New Sit	te Location
		Please complete and	provide all information.
Road	/Street		Nearest Intersection
Property I.D. No. 44			Lot Number
The f	ollowing documents	must be provided with this a	application:
A.	Proof of Ownershi	p (deed or land contract)	
B.	Site Survey and legal description of property		
C.	Driveway Permit:	•	oe staked at its exact location with Road Commission ddress tag will be furnished by the Building Department
D.	Site Plan showing	the location of the driveway,	, provided for on the opposite side of this application.
Applicant Signature			Date

## Site Plan must include the following:

Example:

Assigned By:	
Number Assigned To This Site:	ice Use Only
and	
<ul> <li>B. Nearest Crossroad</li> <li>C. Location of Dwelling</li> <li>D. Driveway Location w/Distance from Side Property Lines</li> <li>E. Driveway Permit No</li> <li>F. Length of Driveway ft.</li> <li>G. Addresses of Adjacent Neighbors and</li> </ul>	ROAD  ROAD
A. Property boundaries	