APPLICATION FOR PERMIT DEPARTMENT OF PUBLIC SERVICES

City of Hastings 201 E. State Street Hastings, MI 49058 269-945-2468

Pleas	se pro	vide plans/drawings for proposed projec	cts.		
Date:					
1.	ļ	Applicant Name:	(MIDDL	E)	(FIRST)
		Address:	(CITY)		(STATE/ZIP)
		Telephone:			
		OCCUPANCY OF, OR WORK W July 1, 2023 to June 3			WAYS
[]	<u>Driv</u>	veway Permit:			
	[]	New Construction - Reconstruction -		\$200.00 \$150.00	
	Insp	pection Date	Approved -	[]Yes	[] No
[]	<u>Pav</u>	ement Cut Permit:			
	[]	Location		\$150.00	
[]	Buil	Iding Demolition Sewer Inspection Pe	ermit:		
LJ	[]	Location		\$150.00	
	Iner	pection Date	Approved -	[] Yes	[] No

] <u>Oc</u>	Occupancy of Right-of-Way:						
[]	Location:	Location:					
	Estimated Start and Length of Closure:						
	Description of project						
	Approved -	[] Yes	[] No				
. Ар	plicant's Signature:			(Date)			
. Sta	uff Signature:			(Date)			
				,			
Applicati	on #:	Date(s) Advertised:					
Filing Da	te:	Date of Meeting:					
	d:	Board Action:		Effective Date:			
10 Clerk	s Office on:	_		Effective Date:			