

BRIDGEHAMPTON TOWNSHIP

491 North Ruth Road (Hall Location)
P.O. Box 83 (Mailing Address)
Carsonville, Michigan 48419

APPLICATION FOR LAND USE PERMIT

Name of Applicant _____ Applicant's Phone No. _____
Address of Applicant _____

Legal Description of Property (May be attached to this form):

Name of Property Owner _____ Property Owner's Phone No. _____
Address of Property Owner _____

INFORMATION ABOUT PROPOSED BUILDING PROJECT:

Purpose of Proposed Building: _____

Dimensions of Proposed Building: _____

Estimated Cost: _____ Contractor Information: _____

Other Information: _____

PLEASE PUT DRAWING ON REVERSE SIDE OF THIS SHEET OR ATTACHED TO THIS FORM
*PROPERTY OWNER GIVES PERMISSION TO BRIDGEHAMPTON TOWNSHIP TO INSPECT THE BUILDING
OR IMPROVEMENTS.*

Signature of Property Owner

Date

Signature of Applicant

Date

For Township Use:

Any conditions of Approval:

Approved or Denied

Bridgehampton Township Official: _____ Date: _____