

KEWEENAW COUNTY CONSTRUCTION CODES DEPARTMENT

5095 4TH STREET, EAGLE RIVER, MI 49950

Phone (906) 337-3471 Fax (906) 337-2795

911 ADDRESS REQUEST PERMIT

APPLICANT INFORMATION

DATE: _____

NAME: _____

ADDRESS: _____

PHONE NUMBER: _____ PHONE COMPANY: _____ *ADDRESSING FEE: **\$150.00**

OWNER INFORMATION

NAME: _____

ADDRESS: _____

PHONE NUMBER: _____ PHONE COMPANY: _____

LOCATION OF PROPERTY

COMMUNITY: _____ SUBDIVISION: _____

LOT _____ BLOCK _____ SECTION: _____ TOWNSHIP: _____ RANGE: _____ LOT SIZE _____

PROPOSED USE: _____

SIGNATURE OF APPLICANT/OWNER

VALIDATION - FOR DEPARTMENT USE ONLY

RECEIPT # _____ DATE: _____ CHECK # _____ BY: _____

*TEMPORARY 911 ADDRESS: _____

PERMIT NUMBER _____

SIGNATURE OF 911 COORDINATOR, LISA KARRIO

PERMANENT 911 ADDRESS: _____

* A PERMANENT 911 NUMBER WILL BE ISSUED AFTER THE GPS LOCATION IS DETERMINED. THE ADDRESSING FEE INCLUDES THE ADDRESS LOCATION, THE ORDERING AND INSTALLATION OF THE SIGN.