

MIDLAND COUNTY ROAD COMMISSION

2334 N. Meridian Road
Sanford, Michigan 48657
(989) 687-9060 / FAX: (989) 687-9121

Date of Application: _____

Requested by: _____ Phone: _____

Address: _____
Street City State Zip Code

Road Name Request: 1st Choice _____
2nd Choice _____
3rd Choice _____

Location: _____
Township Section Applicant Tax Parcel Number
PRIVATE ROAD _____ PUBLIC ROAD _____ NEW _____ EXISTING _____

ROAD TYPE (circle one): SAND, DIRT, GRAVEL, PAVED Length of Road _____ Width of Road _____

(circle one) N, S, E, or W off _____ Between _____ and _____

REASON FOR REQUEST (single residence, multiple residence, site condo, land division, include number of parcels)

.....

APPROVAL / DENIAL OF ROAD NAME

Road Name Approved by
Midland County G.I.S Dept.: _____ Date _____
(989)837-7147

.....

Road Name Approved by **Township:** _____ YES NO If NO Explain: _____

Date _____
(Authorized Township Signature)

*Includes signatures of all property owners in petition section of this form: YES NO

.....

At a regular / special meeting of the **Board of Road Commissioners of Midland County** held on
_____, 20__ the road name _____
was Approved / Denied by the following: _____ yeas; _____ nays.

- Continued on back -

ROAD NAME PETITION

Use additional pages if necessary to include all property owners.

Property Owner

Name: _____

Address: _____

Phone: _____

Parcel #: _____

Dwelling type: _____

Signature _____

Date _____

Property Owner

Name: _____

Address: _____

Phone: _____

Parcel #: _____

Dwelling type: _____

Signature _____

Date _____

Property Owner

Name: _____

Address: _____

Phone: _____

Parcel #: _____

Dwelling type: _____

Signature _____

Date _____

Property Owner

Name: _____

Address: _____

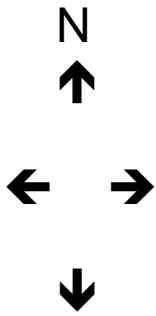
Phone: _____

Parcel #: _____

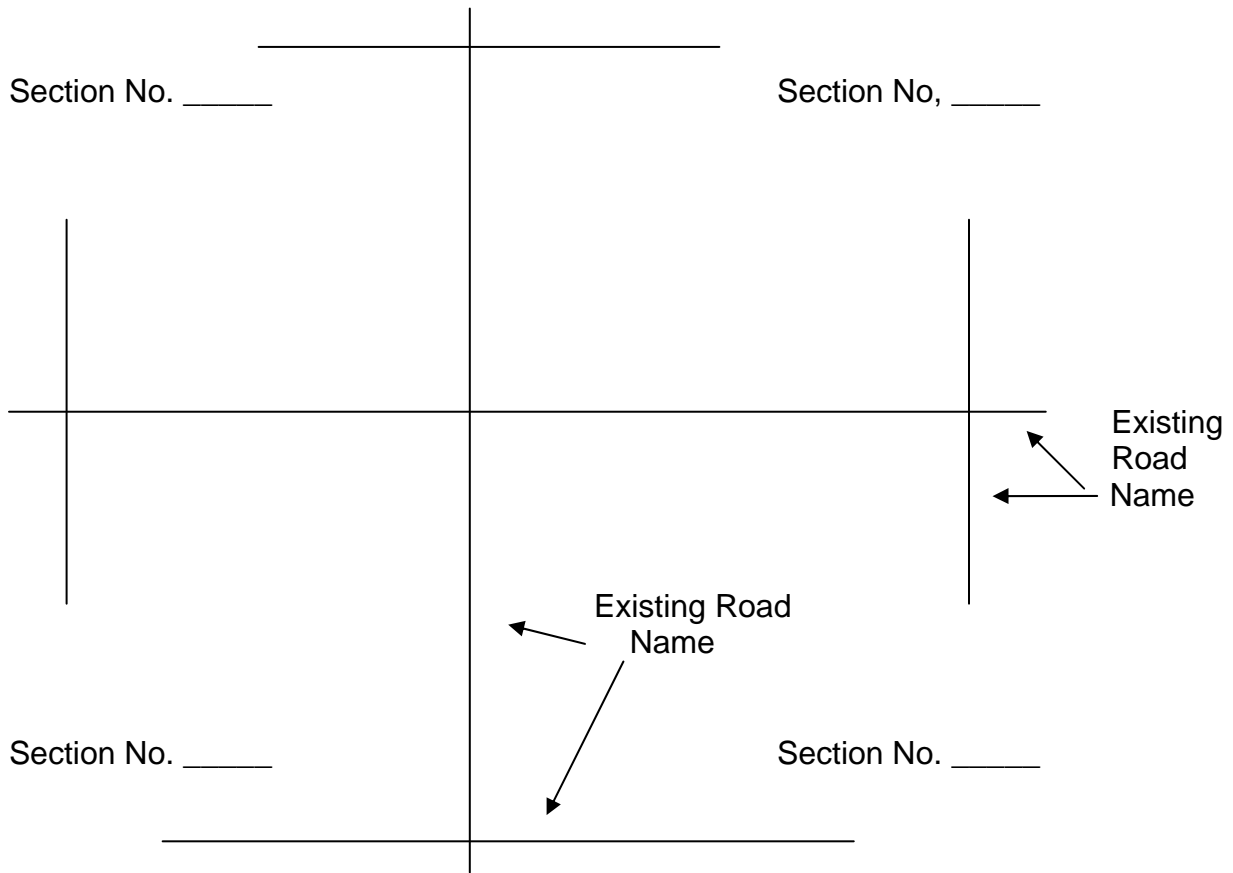
Dwelling type: _____

Signature _____

Date _____



_____ Township



Please draw in approximate location of new road.