



Midland County Road Commission

2334 North Meridian Road

Sanford, Michigan 48657

(989) 687-9060 - Fax (989) 687-9121

ROAD NAME REQUEST APPLICATION

Requested by: _____ Phone: _____

Address: _____
Street City State Zip Code

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

Location: _____
Township Section Tax Parcel Number

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

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

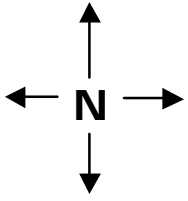
APPROVAL / DENIAL OF ROAD NAME

Road Name Approved by **Housing**: _____ Date _____

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

(Authorized Township Signature) Date _____

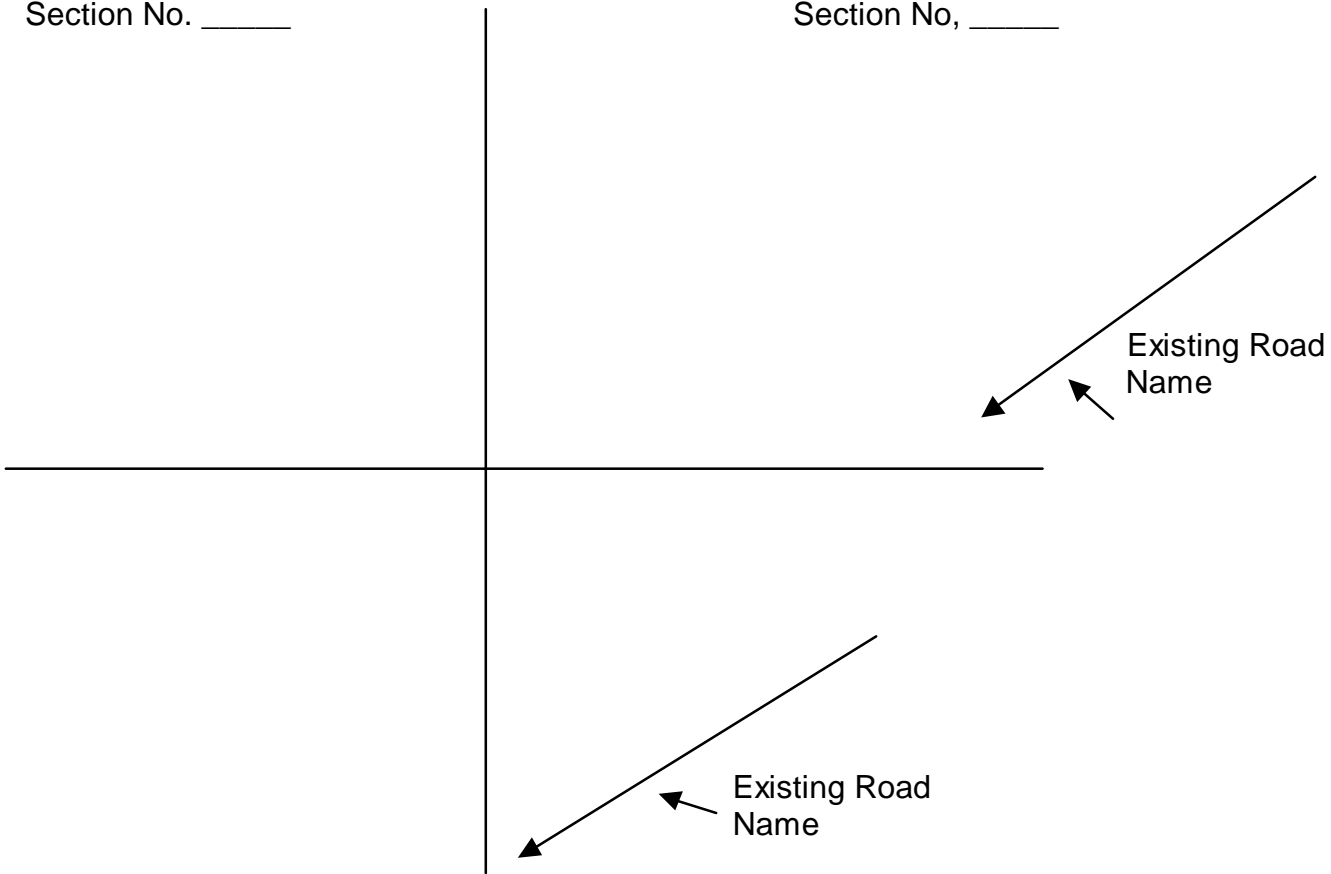
At a regular / special meeting of the **Board of Road Commissioners of Midland County** held on _____, 200__ at _____ a.m./p.m. the road name _____ was Approved / Denied by the following: _____ yeas; _____ nays.



_____ Township

Section No. _____

Section No, _____



Section No. _____

Section No. _____

Please draw in approximate location of new road.