

**RIGHT-OF-WAY PERMIT APPLICATION**  
**CITY OF LUDINGTON**  
**DEPARTMENT OF PUBLIC WORKS**  
**231-843-2873**

Please Print

**Property Information**

Address: \_\_\_\_\_

**Applicant Information**

Property Owner/Business/Utility Co: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Phone #: \_\_\_\_\_

Cell #: \_\_\_\_\_

Email Address: \_\_\_\_\_

**Project Information**

(Check one)    Curb Cut                      Curb Construction                      Work within the R.O.W.

Project Details:

**Authorization**

By signing the application the applicant is authorizing City Staff permission to make site inspections as necessary. The undersigned affirms that the information included in this application is correct. Further if the request is approved, the applicant will comply with all of the requirements of the City of Ludington in accordance with the specifications set forth.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Office Use**

**Department of Public Works Review**

Approved

Denied

\$25.00 Fee Paid

Notes: \_\_\_\_\_

\_\_\_\_\_

Signature \_\_\_\_\_ Date: \_\_\_\_\_

