



Permit No. _____

Date of Issuance: _____

DEPARTMENT OF PUBLIC WORKS

City of Marine City
260 S. Parker
Marine City, MI 48039

Curb Cut Permit

Applicant Name: _____

Address: _____ City/State: _____ Zip Code: _____

Contact # _____

Location of Work: _____

Description of Work: _____

14' Cut – Single Car Approach

24' Cut – Double Car Approach

Or Other – Driveway Extension, Sidewalk, etc.

Size of Cut: _____

Requirements: Mark location of curb cut with paint.

Please contact the Department of Public Works after marking of curb, (810) 765 – 9711.

Must also submit a Right – Of – Way Permit to the City

Signature and Title of Applicant

Date Application Submitted

NOTE: Department of Public Works does not make curb cuts, a contractor must be hired.

OFFICE USE ONLY

Approved By: Dept. of Public Works _____

Date: _____