DEMOLITION CLEARANCE AGREEMENT

I, have contacted the a energize, remove or abandon its electric, gas a	appropriate utility companies to de-
following location:	indor sewer and water racinities at the
Address	Owner Name
Address	. •
	Owner Address
City, Village, Township	Owner Address
Property Tax ID Number (Required)	Owner Phone
D 1	
Describe type of building and use (i.e.: Reside	ence, storage building, etc.):
	·
In the integrat of refers the auritment conserts	make a final improvious of the building of
In the interest of safety, the applicant agrees to the end of the five-day period and if not satisfi	
services are disconnected, will call the approp	• • • • • • • • • • • • • • • • • • • •
representative will respond on an emergency b	
	•
The power company agrees to de-energize and remove or abandon its electric facilities serving the	The gas company agrees to de-energize and remove or abandon its gas facilities serving the above-cited
above-cited building within five working days, being the end of the workday on	building within five working days, being the end of
penig the end of the workday on	the workday on
	1
The water & sewer company agrees to de-energize and remove or abandon its facilities serving the	Applicant
above-cited building within five working days,	Address
being the end of the workday on	Address
* (City
	State Zip
DEDMIT DED ON OR	Phone
PERMIT FEE: \$75.00	
Submit completed application to: MTS 111 Grand St Allegan MI 49010	Signature
1-800-626-5964	

Michigan Township Services-Allegan. Inc

111 Grand Street, Allegan Mi 49010 1-800-626-5964 * 269-673-3239 Fax 269-673-9583 Email <u>mtsallegan@frontier.com</u>

Agent Authorization

Job Address: City or Township: This is to inform you that I, (owner name) as owner of the above referenced property authorize (agent name) , to act as my agent in seeking / obtaining	Date:	
This is to inform you that I, (owner name)as owner of the above referenced property authorize (agent name)	Job Address:	
as owner of the above referenced property authorize (agent name)	City or Township:	<u>.</u>
	•	,
		, •
various permits and approvals on my behalf.		ny agoni in occining 7 obtaining
These include:	These include:	
Various Township/City Zoning and Building approvals Other County or State permit approvals Others as needed	Other County or State permit approvals	ling approvals
Property Owner Signature and Phone Number	Property Owner Signature and Phone Number	

This completed form must be submitted with a zoning/building permit application. Permits will not be issued without it.