RILEY TOWNSHIP 13042 BELLE RIVER RD. RILEY TOWNSHIP, MI 48041 Phone (810)392-2326 FAX (810)392-2918

Street Address Application for Building Dept.

PERSON REQUESTING STREET ADDRESS:	Date Application Rec	ceived:	Fee \$75.00:
Owner / Applicant Name:		Phone:	
Mailing Address:	City:	State:	Zip Code:
LEGAL OWNER'S NAME AND ADDRESS:	nail address:		
Name (if not applicant):		Phone:	
Mailing Address:	City:	State:	_ Zip Code:
Signature of Legal Owner:			
THE FOLLOWING INFORMATION MUST BE P	ROVIDED:		
Tax Code Number 74-29 Location	on of Property:		
Address of house nearest your property on same side of road	on either side:		
Address of house nearest your property on either side of road	l:		
THE FOLLOWING MUST BE INCLUDED ON YO	OUR PLOT PLAN:		
() Proof of Ownership			
() Legal Description			
() Plot Plan with Driveway Location (Site Plan showin	g where your home and o	driveway will be locat	ed and the distance from
lot lines)			
01	fice Use ONLY		
Address Assigned:			
Building Department Signature:			DATE:
TEMPORARY ADDRESS: PERMANENT ADDRESS:			
N. C. D. C. C. P. C.		11 1	6 6 11 4 11

Note: Detroit Edison will require this form, along with property service.



sketch, legal description, and proof of ownership to provide