



Spring Lake Township  
101 S. Buchanan St. Spring Lake, MI 49456  
Phone: (616) 842-1340  
www.springlaketwp.org

## BIKE PATH/SIDE WALK CUT PERMIT

DATE \_\_\_\_\_

### WORK LOCATION

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

City, State, Zip: \_\_\_\_\_

Name: \_\_\_\_\_

Phone Number: \_\_\_\_\_

### CONTRACTOR INFORMATION

Name: \_\_\_\_\_

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

Phone Number: \_\_\_\_\_

Field Person: \_\_\_\_\_

Cell Phone Number: \_\_\_\_\_

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

Refundable Deposit Fee: \$250.00    Permit Fee: \$50.00

REASON FOR CUT: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

### *Office Use Only*

Permit #: \_\_\_\_\_ Date Received: \_\_\_\_\_ Fee: \_\_\_\_\_

Date of Approval: \_\_\_\_\_ Date of Denial: \_\_\_\_\_ Approved by: \_\_\_\_\_

Notes or Conditions: