PID# DATE:
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## **County of Keweenaw**

Construction Codes Department 5095 4<sup>th</sup> Street, County Courthouse Eagle River, MI 49950

## **CONTRACTOR/OWNER AUTHORIZATION**

Property Ov	vner Name:			
Email:		Contact Number:		
Property Ad	ldress			
Contractor	Name:			
Email:		Contact Numb	Contact Number:	
Michigan Li	icense #:	Expiration Date:	Copy on File:	
This is an au	ıthorization for the follov	ving: (Check all that apply)		
0	Zoning			
0	Excavation			
0	Construction			
0	Electrical			
0	Mechanical			
0	Plumbing			
		l contractor to act as my authorizi thorizing in field of Specialty)	ng agent in all matters	
0	<b>Zoning Permit</b>			
0	<b>Building Permit</b>			
0	Soil Erosion and Sedin	nentation		
0	Electrical			
0	Plumbing			
0	Mechanical			
SIGNATURE OF OWNER		APPLIC	ATION DATE	
SIGNATURE	OF OWNER	APPLIC	ATION DATE	

A pre-application conference with the construction codes department is recommended for large projects. Compliance with all zoning, construction, trade codes and ordinances are mandatory. The property owner is liable for any violation committed on behalf of the contractor.