

BOARD OF COUNTY ROAD COMMISSIONERS OF THE COUNTY OF KENT

1500 Scribner Ave. NW, Grand Rapids, MI 49504 Phone: (616) 242-6920 Fax: (616) 336-4397
 Permit No.
 27735

 Application Date
 5/30/2007

 Effective Date
 5/30/2007

 Expiration Date
 06/19/2008

| | | | D | RIVEW | AY PE | RMIT | ■ ************************************ | 200000000000000000000000000000000000000 |
|--|---|--|--------------------------------------|------------------------------------|---|---|--|---|
| Location | Location SEE COMMENTS | | | | | Township PLAINFIELD | | IFIELD |
| | 4150 GRAND RIVER DR. NE | | | | | Lot# | | RAL GARAGE |
| Owner | Klaas Kwa | ent | | | AND | Phone 1 Phone 2 Fax | (616) 706-5812 | Permittee Type Owner |
| Contractor | | | | <u></u> | , , , , , , , , , , , , , , , , , , , | IMA | L | |
| | | (Miss Dig |) 72 hours | before dig | gging | Call 800-482-7171 | (toll free) Work Conditions | 2 |
| | veway Type ement Type | Residential Asphalt | | | | All work to be done in | accordance with the KCF | RC engineering plan. |
| Number Drivewa | | 1 | 0.000.000.0000 | e Road? No | - - | - | be notified 48 hours in a | |
| | | | | | - - | | of roadway including blac | |
| Requested Restaking Date Culvert Type | | | | | | KCRC to place culvert in ditch. Owner to fill over pipe and build driveway. | | |
| Number Flared E | | | 33 | tequired? No | <u>.</u> | Work to be completed signing to be used. | l as per attached applicati | on. Proper traffic |
| Culvert Lengthft. | | | _ft. | · · | | Engineering Plan ID: | | |
| t is understood that C.C.R.C. Specificiati Special Provisions | all activity resu ons and Cond None | ulting from the grant litions for Highway F | ing of this perm Permits. (see re | ilt is to be in acc verse side) | ordance wit | h all K.C.R.C. specifications | and conditions either checker | d or written or stated in the |
| Comments | back ea | | new hom | ne) in orde | | | and remain level om entering drive | |
| Charges First Driveway, | , Residenti: | ai, Asphalt | į | \$50.00 | | | | |
| | | | | Permit fee o | | | Total Permit Fee Authorization SES | |
| Foreman | | | | | Pay | ment Method V | ISA/MC Refere | nce |