

OFFICE OF THE DRAIN COMMISSIONER

Dale Twing, Drain Commissioner
306 S North St, White Cloud, Michigan 49349
Telephone: (231) 689-7213 Fax: (231) 689-7266



**APPLICATION FOR PERMIT
CROSSING OR CONNECTING TO COUNTY DRAIN**

Rev: June 2026

Drain Name: _____

PROJECT INFORMATION:

Project: _____

Property Address: _____

Major Crossroads or Intersection: _____

Township/City/Village: _____ Parcel ID: _____

APPLICANT INFORMATION:

Contact Name: _____ Email Address: _____

Company Name: _____ Phone No.: _____

Address: _____

City: _____ State: _____ Zip: _____

CONTRACTOR / ENGINEER / AGENT INFORMATION:

Contact Name: _____ Email Address: _____

Company Name: _____ Phone No.: _____

Address: _____

City: _____ State: _____ Zip: _____

PERMIT CONDITIONS:

1. This application does not guarantee a permit. If there are expenses to review the proposed activity, the applicant shall cover the cost.
2. This permit must be accompanied by the information noted in our "Plan Requirements and Standards for Crossing, Connection, and Encroachment" available on our website.
3. The proposed work shall be constructed at the location, elevation, and manner shown on the drawing attached hereto, which is, hereby, made a part of this agreement.

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4. Upon the completion of construction, the contour shall be, as near as possible, the same as that which existed prior to the start of construction. All work done in connection with the drain shall be left in good condition.
5. The drain shall be maintained and left unobstructed during construction to prevent the backing up of water which would cause flooding of adjacent land.
6. If the proposed work causes damage or an increase the cost of the Drain in any way, the applicant agrees to pay for all costs for maintenance, repair, and improvement of the Drain.
7. The applicant agrees to notify the Drain Commissioner of the project start date so an inspector may be present, if necessary.
8. Authority granted by this permit does not waive permit requirements under Part 91, Soil Erosion and Sedimentation Control, Public Act of 1994, or the need to acquire applicable MDEQ permits.
9. The applicant hereby agrees that the facilities to be constructed, placed, or installed under this permit may be relocated at the discretion of the Newaygo County Drain Commissioner. Any relocation will be made at no charge to the Newaygo County Drain Commissioner.
10. If this application is approved, applicant will meet all legal requirements and be responsible to the Newaygo County Drain Commissioner for any damage to county drains. Applicant will pay for all damages, fines, and penalties and shall not hold the Newaygo County Drain Commission staff, or designated county or intercounty drainage districts, responsible for any suits, claims, damages, and proceedings of any kind.

I, the undersigned, in applying for a permit, agree to abide by the terms and conditions outlined in this document and certify that I have the legal authority to perform the work for which the permit will serve/or I am the permittee's authorized agent.

Signature: _____ Date: _____

(Office use only below this line)

____ Approved

____ Not Approved

Comments: _____

Signature: _____ Date: _____