

BACKUS TOWNSHIP, ROSCOMMON COUNTY, MI

RV/Camper Use Application

Permit Length (Check all that apply)		Permit Dates	
<input type="checkbox"/>	Temporary - Seven (7) Days Maximum	Application Date	
<input type="checkbox"/>	Seasonal - Memorial Day to Labor Day	Requested Start Date	
<input type="checkbox"/>	Portable Toilet Service (Contract Attached)	Requested End Date	
<input type="checkbox"/>	Septic (Health Department Approval Attached)	Temporary = \$20	Seasonal = \$75

Applicant Information

Name _____ Phone _____
 Address _____
 (Street) _____ (City, State) _____ (ZIP) _____
 Email _____ Fax _____
 Driver's Lic.: _____ RV/Camper: _____
 Number _____ State _____ Plate Number _____ State _____

Property Owner Information (If different from applicant)

Name _____ Phone _____
 Address _____
 (Street) _____ (City, State) _____ (ZIP) _____
 Email _____ Fax _____

 Signature of Owner _____ Date _____

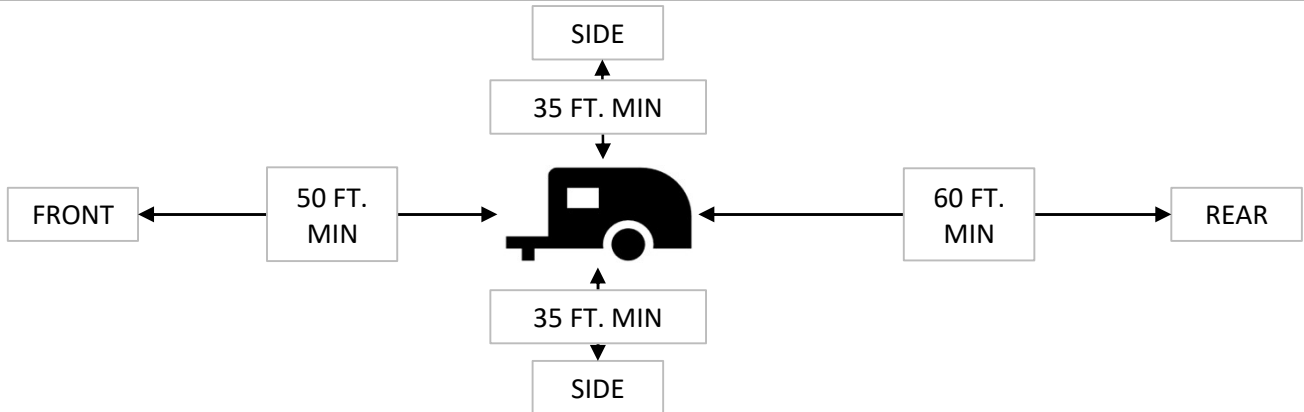
The signature of the owner is, for the purposes of this application, permission for the applicant, if not the owner, to apply for the request which is the subject of this application.

RV/Camper Location Property Information

Address/Location _____

 Parcel ID (as found on property tax bill): 002- _____ - _____ - _____
 Size of Parcel (Acres) _____
 NOTE: Minimum of 5 Acres required for Permit Approval

Minimum Setbacks for RV/Camper Placement



I hereby attest that all information on this application is, to the best of my knowledge, true and accurate.

Signature of Applicant _____ Date _____

Township Use Only

Date Issued: _____ Fee Paid: \$ _____ Permit Number: _____
 Document Received: _____ Service Contract _____ Health Department Septic Approval _____
 Application accepted by: _____