



BLAIR TOWNSHIP EMERGENCY SERVICES

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FIRE (231) 276-6341 EMS (231) 276-9354 Fax (231) 276-6686

APPLICATION FOR SITE PLAN REVIEW

DATE: _____ PERMIT #: _____

APPLICANT NAME: _____

CONTACT PERSON: _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

APPLICANT PHONE NUMBERS: (BUSINESS) _____

(CELL) _____ (FAX) _____

APPLICANT SIGNATURE: _____

SITE INFORMATION

SPECIFIC USE OF BUILDING: _____

TYPE OF CONSTRUCTION: _____

MUNICIPAL WATER AVAILABLE : YES NO

BUSINESS OR PROJECT NAME: _____

SITE ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____