

CITY OF MARQUETTE
APPLICATION FOR LICENSE/EASEMENT
OF CITY OWNED PROPERTY



CITY STAFF USE

Date Submitted: _____ Parcel ID#: _____ File #: _____

Property Address/Location: _____

Adequate Legal Description Submitted: Y / N Anticipated Hearing Date: _____

FEE \$445 (We can only accept Cash or Check (written to the City of Marquette))

INCOMPLETE APPLICATIONS WILL NOT BE ACCEPTED, ALL OF THE INFORMATION REQUIRED IS PRESENT AT THE TIME OF THE APPLICATION - NO EXCEPTIONS!

APPLICANT CONTACT INFORMATION

APPLICANT

Name: _____

Address: _____

City, State, Zip: _____

Phone #: _____

Fax #: _____

Email: _____

****APPLICANTS OR REPRESENTATIVES ARE STRONGLY ENCOURAGED TO BE PRESENT AT THE MEETING****

APPLICANT'S REPRESENTATIVE

Name: _____

Address: _____

City, State, Zip: _____

Phone #: _____

Fax #: _____

Email: _____

****APPLICANTS OR REPRESENTATIVES ARE STRONGLY ENCOURAGED TO BE PRESENT AT THE MEETING****

What is the street address, or nearest street address, to the location of the requested license/easement?

Please describe the reason or necessity for the requested license/easement for use of the City property:

You may attach sketches, maps, photos, or other items that may help to illustrate/visualize your request. Community Development staff will attach a photo-map of the area.

Attachments: _____

LEGAL DESCRIPTION

Legal description of the license/easement area:

SIGNATURE

I understand that this application itself is not considered an approval and only the Marquette City Commission has the authority to grant an approval for a license/easement for use of property owned by the City of Marquette.

Signature: _____ Date: _____