

☐ Other (please explain)

## **Livingston County Road Commission**

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Email: mail@livingstonroads.org

## COMMERCIAL WAIVER APPLICATION

PLEASE FILL IN INFORMATION IN BOTH SECTIONS AND PROVIDE ONE COPY OF A SITE PLAN

## **APPLICANT INFORMATION** NAME: **CURRENT ADDRESS:** CITY, STATE, ZIP CODE: TELEPHONE: FAX NUMBER/EMAIL: SITE INFORMATION NAME OR TYPE OF DEVELOPMENT: NAME OF PRIVATE ROAD OR EXISTING COMMERCIAL DRIVEWAY LOCATED ON: COUNTY ROAD LOCATED OFF OF: **NEAREST COUNTY ROAD:** TOWNSHIP: **SECTION NO.:** DATE: **REASON FOR WAIVER:** ☐ Private Road ☐ Joint Driveway □ Demolition/Replace □ Addition of Outbuilding ☐ Change in Use ☐ Addition to Building/Facility