

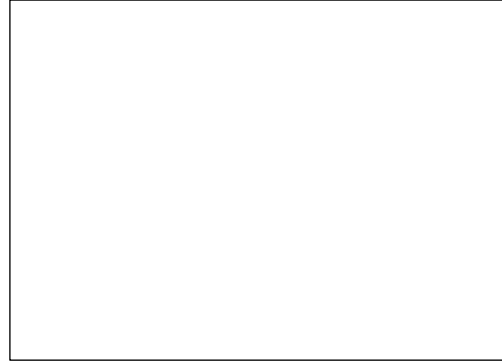
COUNTY OF KALKASKA  
ADDRESS ISSUANCE DEPARTMENT

605 N Birch St, Kalkaska, MI 49646

mdaniels@kalkaskacounty.org

Telephone (231) 258-3340

Fax (231) 258-3341



Please indicate the location of the structure, proposed/actual driveway, directional arrows, and neighboring houses with approximate distances/directions. Label streets.



Applicant please read:

1. Property addresses shall be assigned based on rural and urban baseline standards.
2. A completed application along with a \$5.00 application fee, payable to Kalkaska County, must be submitted to the Address Issuance Department prior to the assignment of a house address.
3. It is the intent of the department to process all applications within fifteen business days of receipt of completed application and fee.
4. Notification of address issuance will be provided to the following departments/agencies: Kalkaska County E911, Cherryland Electric, Consumers Energy, DTE, Great Lakes Energy, County Equalization, Township Treasurer, Assessor & Clerk, and the USPS.

Applicant Signature: \_\_\_\_\_ Date: \_\_\_\_\_

For Office Use Only:

Date: \_\_\_\_\_ Received by: \_\_\_\_\_

Fee Received? \_\_\_ Check No \_\_\_

E9-1-1 Approved Signature: \_\_\_\_\_

House Number Issued: \_\_\_\_\_ Date Distributed: \_\_\_\_\_

APPROVED BY BOC 2.15.17

**COUNTY OF KALKASKA  
ADDRESS ISSUANCE DEPARTMENT**

605 N Birch St, Kalkaska, MI 49646

mdaniels@kalkaskacounty.org

Telephone (231) 258-3340

Fax (231) 258-3341

**APPLICATION FOR ASSIGNMENT OF NEW ADDRESS NUMBER**

Please fill in the application as completely as possible, ensuring to print or type legibly. The completed application should be returned, with the \$5.00 application fee, payable to Kalkaska County, to the address above. Applications may be emailed but will not be processed until the application fee is received.

**Owner(s) Information:**

Name(s):	
Telephone No	Email Address:
Current Mailing Address:	

**Type of Structure:**

<input type="checkbox"/> Single Family Residence	<input type="checkbox"/> Commercial (specify use): _____
<input type="checkbox"/> Garage	<input type="checkbox"/> Storage/Pole Building
<input type="checkbox"/> Demolition	<input type="checkbox"/> Other: New Construction vacant land

**Location of Property:**

Street: _____		City: _____		
Zip Code: _____	Township: _____	Parcel ID: _____		
Section: ___	Town: ___	Range: ___	Lot No. ___	Subdivision: _____

**Directions to Site:**

The location of the driveway is approximately _____ Feet/Miles (circle one) North or East (circle one) of _____ (Neighboring Property Address) and approximately _____ Feet/Miles (circle one) South or West (circle one) of: _____ (Neighboring Property Address), Nearest cross streets: _____ The driveway is marked by: _____
--