Central Michigan District Health Department

APPLICATION

LAND USE EVALUATION

Fee: See Fee Schedule

Office Use Only	
Date:	LU #:
Fee:	Comp #:
Receipt #	

County	Twp/City	Fraction	Section	Town	Range	Subdivision	Lot

Parcel ID #: _____ Applicant's Name: _____

Parcel less than 1 acre: ☐ YES ☐ NO Mailing Address: _____

Address of Proposed Property: _____ _____

Residential ☐ Commercial ☐ Telephone: _____

Directions to Site From Health Department: _____

_____

_____

Present Owner: _____ Address: _____

Return This Form With Current Fee To Your Local Branch Office Of:

Central Michigan District Health Department — To Arrange An Appointment Call:

Arenac County, 3727 Deep River Rd, Standish, MI 48658	989-846-6541
Clare County, 225 W. Main St, PO Box 237, Harrison, MI 48625	989-539-5092
Gladwin County, 103 N. Bowery St, Gladwin, MI 48624	989-426-9431
Isabella County, 2012 E. Preston St, Mt. Pleasant, MI 48858	989-773-5921
Osceola County, 4329 220th Ave, Reed City, MI 49677	231-832-5532
Roscommon County, 1015 Short Dr, PO Box 739, Prudenville, MI 48651	989-366-8921

BELOW FOR HEALTH DEPARTMENT USE ONLY

SOIL BORINGS

*WT = Water Table

PROPERTY SKETCH

Soil Classification: _____

Water Supply Information: _____

_____

_____

_____

_____

Comments: _____

_____

_____

_____

_____

Evaluation Summary: Suitable ☐ Unsuitable ☐ Suitable if Modified ☐

Environmental Health Sanitarian _____ Date _____