

**TEMPORARY OCCUPANCY APPLICTION  
ANTRIM COUNTY BUILDING DEPARTMENT  
PO BOX 188  
BELLAIRE, MI 49615  
(231) 533 – 8373 FAX (231) 533-6041**

**BUILDING PERMIT #** \_\_\_\_\_

**PERMIT FEE: 90 DAY @ \$140.00** \_\_\_\_\_  
**EXTENSION FEE @ \$165.00** \_\_\_\_\_

**RECEIPT # :** \_\_\_\_\_ **CHECK # :** \_\_\_\_\_

**PROJECT INFORMATION**

PROJECT NAME
STREET ADDRESS OR JOB LOCATION (STREET # AND NAME)
PROPERTY TAX #
TOWNSHIP

**IDENTIFICATION**

CONTRACTOR NAME
MAILING ADDRESS
CITY _____ STATE _____ ZIP CODE _____
TELEPHONE NUMBER -

**HOMEOWNER**

NAME
MAILING ADDRESS
CITY _____ STATE _____ ZIP CODE _____
TELEPHONE NUMBER -