



Village Of Lawrence
157 N. Paw Paw
P.O. Box 217
Lawrence Michigan 49064
(269) 674-8161 Fax (269) 674-3004

Application for Street & Sidewalk Display

Applicant(s)

Name _____

Street Address or P.O. Box Number _____

City _____ State _____ Zip Code _____

Area Code & Telephone Number _____

Street address of property involved _____

Property Number _____

Legal description of property
involved _____

Building frontage at street, sidewalk,
etc. _____

Present zoning classification _____

Current ownership status, if applicant is not deed
holder _____

Explanation of request (attach separate sheet if
needed) _____

*****DO NOT WRITE BELOW THIS LINE*****

Village Council Approval _____ Date _____

Village Council Disapproval _____ Date _____

Village Clerk _____ Date _____