



Sidewalk Snow & Ice Exemption Application

115 South Main Street · P.O. Box 389 · Webberville, MI 48892 · Ph: 517-521-3984 · Fax: 517-521-3165

Name: _____

Address: _____

Phone: _____

Please describe the reason you are requesting an exemption from the sidewalk snow & ice removal policy. _____

I, the undersigned, understand that although I have submitted an application for sidewalk snow and ice removal exemption, I am still responsible for adhering to Ordinance No. 155 and the procedures established to carry out that ordinance until I receive written notification to the contrary from the Village of Webberville.

Signature

Date

FOR OFFICE USE ONLY:

Received by: _____ Date: _____

Council Action: _____ Date: _____