

**North Branch Building Dept.
6771 Elm Street
PO Box 186
North Branch, MI 48461
(810)688-3031 Fax: (810)688-2800**

INSPECTION REQUEST

Permit #: _____

Location: _____

Date for Inspection: _____

Type of Inspection: _____

Signature of Owner/Contractor: _____

Please fax request to the number above or drop off to the Building Department at the address listed below.