

TOWNSHIP OF STRONG

REQUEST FOR 911 MEASUREMENT

Date: _____ Roll # _____

Name of Applicant: _____ Phone #: _____

Address of Applicant: _____
(property to be measured)

CON: _____ LOT: _____ LEGAL DESCRIPTION: _____

ROAD NAME: _____ Nearest Neighbour's 911 #: _____

The measurement is taken from your driveway to your neighbour's driveway.

Instructions: Please provide us with a measurement (in feet) of the distance from your driveway to your closest neighbour's driveway regardless if they are across the road.

If you would prefer us to take the measurement, please indicate on the application and we will send out someone from the Public Works department as soon as they are available to do so.