

## APPLICATION FOR APPROVAL FOR VARIANCE FROM STANDARD CLEARANCE PER MCL462.339

Return completed application and plans to: [MDOT-RailSafety@Michigan.gov](mailto:MDOT-RailSafety@Michigan.gov) or mail to Michigan Dept. of Transportation, Rail Safety Section, 425 W. Ottawa, Lansing, MI 48909.

NAME OF COMPANY	NAME OF BUSINESS		
MAILING ADDRESS (Street)	CITY	STATE	ZIP CODE
ADDRESS AND LOCATION OF CLOSE CLEARANCE (If different from mailing address)			
NAME OF CONTACT PERSON	PHONE NUMBER	E-MAIL ADDRESS	
REASON FOR APPLICATION			

TRACK NAME OR NUMBER	OBSTRUCTION	LOCATION OF OBSTRUCTION	SIDE CLEARANCE CENTER OF TRACK TO OBSTRUCTION	DIRECTION FROM CENTER OF TRACK	VERTICAL CLEARANCE ABOVE TOP OF RAIL

OWNER OF TRACK (If different from applicant)			
MAILING ADDRESS (Street)	CITY	STATE	ZIP CODE
RAILROAD(S) SERVING INDUSTRY			
DIRECTION OF TRACKS			
APPLICANT NAME (Print or type)	TITLE		
APPLICANT SIGNATURE			DATE