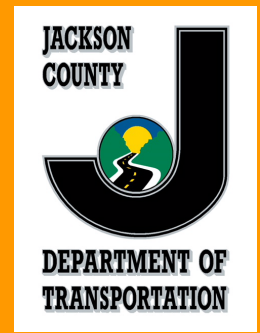


Paint a Plow Application



SCHOOL INFORMATION

School Name

Address

City

ZIP Code

E-mail

Phone

TEACHER INFORMATION

Please provide this information for all teachers who will be assisting with the project

Teacher's Name

Phone Number

Alternative Phone Number

E-mail

Teacher's Name

Phone Number

Alternative Phone Number

E-mail

Desired Plow Delivery Date

Expected Completion Date

ADDITIONAL INFORMATION (Please add any other information you may want us to know)

Please complete this application, scan, and e-mail it to **sdavis@mijackson.org**
The application can also be mailed to our office at:

Jackson County Department of Transportation
2400 N. Elm
Jackson, MI, 49201
Attn: Sheenita Davis