



APPLICATION FOR GRADING/LANDSCAPE PERMIT

APPLICATION NO.: GR

LOC: BS 0408



PLEASE COMPLETE THE FOLLOWING INFORMATION

JOB ADDRESS: _____ UNIT NO.: _____

CITY/LOCALITY: _____ CROSS - ST: _____

ASSESSOR INFORMATION NO.: _____

TENANT: _____
(LAST NAME/BUSINESS NAME) (FIRST) (MI)

OWNER'S NAME: _____
(LAST NAME/BUSINESS NAME) (FIRST) (MI)

OWNER/BUILDER: YES _____ NO _____

ADDRESS: _____

PHONE (____) _____ Ext. _____

APPLICANT: _____
(LAST NAME/BUSINESS NAME) (FIRST) (MI)

ADDRESS: _____

PHONE (____) _____ Ext. _____

CONTRACTOR: _____
(LAST NAME/BUSINESS NAME) (FIRST) (MI)

LIC. NO.: _____ CLASS: _____

ADDRESS: _____

PHONE (____) _____ Ext. _____

ARCH/ENG: _____
(LAST NAME/BUSINESS NAME) (FIRST) (MI)

LIC. NO.: _____ CLASS: _____

ADDRESS: _____

PHONE (____) _____ Ext. _____

WORK DESCRIPTION:

CUBIC YARD HANDLED: _____

LANDSCAPE AREA: _____ SQ.FT.

CHECK IF SUPERVISED GRADING: _____

WATER PURVEYOR NAME: _____

FOR BUILDING AND SAFETY USE ONLY

SUPRV'D GRADING: _____ MAP NBR: _____
STATE HIGHWAY: _____ USE ZONE: _____ CUBIC YARDS HANDLED: _____

SPECIAL CONDITION _____

THIS APPLICATION IS ALSO ASSOCIATED WITH THE FOLLOWING PROPERTIES:

TRACT	LOT	TRACT	LOT	TRACT	LOT	TRACT	LOT	TRACT	LOT	TRACT	LOT
_____	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____

PRINCIPAL: _____
(LAST NAME/BUSINESS NAME) (FIRST NAME) (M.I.)

OR

SUBDIVIDER: _____
(LAST NAME/BUSINESS NAME) (FIRST NAME) (M.I.)

TYPE/INSTRUMENT/NUMBER: _____

ORIGINAL \$: _____

RCV DATE: _____