



APPLICATION FOR GRADING/LANDSCAPE PERMIT

APPLICATION NO.: GR _____ LOC: BS _____

PLEASE FILL OUT 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 _____
 PHONE () _____ Ext. _____

ADDRESS: _____

APPLICANT: _____ (LAST NAME/BUSINESS NAME) (FIRST) (MI)
 PHONE () _____ Ext. _____

ADDRESS: _____ LIC. NO.: _____ CLASS: _____

CONTRACTOR: _____ (LAST NAME/BUSINESS NAME) (FIRST) (MI)
 PHONE () _____ Ext. _____

ADDRESS: _____ 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
_____	_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____	_____

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: _____