

## **GRADING PERMIT APPLICATION**

913 S Dubuque St, Suite 204 Iowa City, IA 52240 Phone: (319) 356-6085 Fax: (319) 356-6084 STAFF USE ONLY Received By:

Permit Number:

Site Address (if applicable)	Parcel Number
Name of Owner	Name of Applicant (if different)
Applicant Street Address (includi	ng City, State, Zip)
Applicant Phone	Applicant Email
Project Description	
The undersigned applicant agrees	s to comply with all County ordinances regulating Sensitive Areas and Erosion
and Sediment Control and certific and correct:	es under oath and penalties of perjury that the foregoing information is true
Applicant's Signature	Date
receipt of permit fee is acknowledge soils associated with this permit sh	to proceed in accordance with the information shown on this application and after ged. This permit shall expire 24 months after the approval date below. All disturbea all be contained on the site or this permit may be revoked.
Initial or check each item below	to confirm that you are aware of the following requirements.
	<b>ort</b> in accordance with the standards of Chapter 8:3.5, at time of application. etails of any proposed impacts to a sensitive area and a complete mitigation
An <b>Erosion and Sediment</b> application.	<b>Control</b> plan in accordance with the standards of Chapter 8:3.7, at time of

A Site Plan that shows existing and proposed contours, limits of disturbance, and any existing structures.

A permit application fee of \$500 due at time of application.