

3400 Plymouth Boulevard Plymouth, MN 55447 General Information (763)509-5500 Inspection Scheduling (763)509-5500 FAX (763) 509-5510

GRADING PERMIT APPLICATION

Appl: #	
\$	(Invoice)

Property Locat	ion:				
		~ OR ~			
Legal Description: I	_otBlock_	Subdivision Na	me		
Property I.D. (PIN) N	0				
For			ermit is ready to be po s office at City Hall.		
Proposed Use:	Residential		Non-Residential		
	Single Family Detached		Church		
	Townhouse		Commercial		
	Two Family		Industrial		
	Multi-Family		Public		
			Other		
	Contractor Other	_ 0 ,, ,, e			
	Zip:				
		Telephone No.:		(Bus., pager, mobile)	
Number of Cubic (Total Dimension	c Yards:	Nun	nber of Disturbed Ac	res:	
Describe Propose	ed Work:				

PERMIT	FEE SCHEDULE	PLAN REVIEW FEE (when required)				
1,001 to 10,000			\$49.00 \$62.25 plus \$. cubic y \$341.2 plus \$ cubic y \$531.25 yards, j			
I HEREBY APPLY FOR A GRADING PERMIT AND I ACKNOWLEDGE THAT THE INFORMATION ABOVE IS COMPLETE AND ACCURATE; I UNDERSTAND THIS IS NOT A PERMIT AND WORK IS NOT TO START WITHOUT A PERMIT. I UNDERSTAND AND HEREBY AGREE THAT THE WORK FOR WHICH THE PERMIT IS ISSUED SHALL BE PERFORMED ACCORDING TO THE FOLLOWING: (1) THE CONDITIONS OF THE PERMIT (2) THE APPROVED BY AND SPECIFICATIONS (3) THE APPROVED BY AND SPECIFICATIONS (4) THE APPROVED BY AND SPECIFICATIONS (4) THE APPROVED BY AND SPECIFICATIONS (5) THE APPROVED BY AND SPECIFICATIONS (5) THE APPROVED BY AND SPECIFICATIONS (5) THE APPROVED BY AND SPECIFICATIONS (6) THE APPROVED BY AND SPECIFICATIONS (7) THE APPROVED BY A PROPERTY BY A PROPERTY BY APPROVED BY A PROPERTY BY APPROVED BY A PROPERTY BY APPROVED BY A PROPERTY BY APPROPRIEST BY APPROVED BY A PROPERTY BY APPROVED BY A PROP						
CONDITIONS OF THE PERMIT, (2) THE APPROVED PLANS AND SPECIFICATIONS (3) THE APPLICABLE CITY APPROVALS, ORDINANCES AND CODES AND (4) THE STATE BUILDING CODE. I UNDERSTAND THAT THE PERMIT WILL EXPIRE AND BECOME NULL AND VOID IF WORK IS NOT STARTED WITHIN 180 DAYS OR IF WORK IS SUSPENDED OR ABANDONED FOR A PERIOD OF 180 DAYS ANYTIME AFTER WORK HAS COMMENCED; AND, THAT I AM RESPONSIBLE FOR ENSURING THAT ALL REQUIRED INSPECTIONS ARE REQUESTED IN CONFORMANCE WITH THE STATE BUILDING CODE.						
Applicant's Sign	ature			Date		
Please Print App	licant's Name					
	For Pla	nn Review Use Only				
If number of cubic yards is be Planning Division reviewed th		□ Yes	□No	If no, do not process.		
If number of cubic yards is ov an Interim Use Permit been ap		□ Yes	□No	If no, do not process.		
Street Sweeping Contract Sub	mitted?	□ Yes	\square No			
Financial Guarantee Submittee	d?	□ Yes	□No			
Cash Deposit Submitted?		□ Yes	\square No			
Inspection Types (to be check	ed):					
☐ Erosion Control	□ Final	☐ Tree Preservat	ion			
Fees (Check those which apply	y)					
☐ Other Fee	☐ Penalty Fee	□ Permit		☐ Plan CheckFee		
Authorized By:				Date		
Permit Purpose (Remarks)						