

CITY OF SANDSTONE

APPLICATION FOR LAND DISTURBANCE PERMIT

DATE OF APPLICATION _____ PERMIT NUMBER _____

JOB SITE ADDRESS _____

LEGAL DESCRIPTION: LOT _____ BLOCK _____ SUBDIVISION _____
OR _____ OF SECTION _____

APPLICANT: (CIRCLE ONE) OWNER CONTRACTOR AUTHORIZED AGENT

OWNER: _____ PHONE _____
ADDRESS: _____ CITY _____ STATE _____ ZIP _____

CONTRACTOR: _____ PHONE _____
ADDRESS: _____ CITY _____ STATE _____ ZIP _____

PROJECT DESIGNER _____ PHONE _____
ADDRESS: _____ CITY _____ STATE _____ ZIP _____

DESCRIBE WORK: _____
REASON FOR WORK: _____

MAXIMUM DEPTH OF CUT BELOW EXISTING GRADE _____
MAXIMUM DEPTH OF FILL ABOVE EXISTING GRADE _____
AMOUNT OF MATERIALS TO BE MOVED ON SITE _____
AMOUNT OF MATERIALS TO BE BROUGHT ON SITE _____

WILL THE SITE REQUIRE WETLAND DELINEATION? YES ___ NO ___

I HEREBY CERTIFY THAT THE ABOVE INFORMATION IS CORRECT AND TRUE AND AGREE TO DO THE PROPOSED WORK IN ACCORDANCE WITH THE DESCRIPTION ABOVE SET FORTH AND ACCORDING TO THE PROVISIONS OF THE ORDINANCES OF THE CITY OF SANDSTONE, MINNESOTA

APPLICANT'S NAME _____ SIGNATURE: _____
(Type or Print)

PERMITTED PROJECTS NOT STARTED WITHIN OR STARTED AND STOPPED FOR MORE THAN 180 DAYS MUST RE-APPLY FOR A PERMIT. ONE EXTENSION IS AVAILABLE IF THERE ARE NO CHANGES TO THE PLANS.

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BOND REQUIRED YES ___ NO ___ AMOUNT OF BOND REQUIRED _____

REQUIRED FROM OR PROVIDED BY _____
SURETY BOND ___ CASH FUND ___ LINE OF CREDIT ___

DATE BOND FILED _____ AMOUNT _____

APPROVED BY: _____

DATE OF APPROVAL _____

PLAN REVIEW	\$ _____
GRADING PERMIT	\$ _____
TOTAL FEES	\$ _____
DATE PAID	_____