



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)

ADDRESS: _____

OWNER/BUILDER: YES__ NO__

PHONE: (___) _____ EXT: _____

APPLICANT: _____

(LAST NAME/BUSINESS NAME)

(FIRST)

(MI)

ADDRESS: _____

PHONE: (___) _____ EXT: _____

CONTRACTOR: _____

(LAST NAME/BUSINESS NAME)

(FIRST)

(MI)

ADDRESS: _____

LIC. NO.: _____ CLASS: _____

PHONE: (___) _____ EXT: _____

ARCH/ENG: _____

(LAST NAME/BUSINESS NAME)

(FIRST)

(MI)

ADDRESS: _____

LIC. NO.: _____ CLASS: _____

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) (MI)

OR

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

TYPE/INSTRUMENT/NUMBER: _____

ORIGINAL \$: _____

RCV DATE: _____