

SADSBURY TOWNSHIP
2920 LINCOLN HIGHWAY, PO BOX 261
SADSBURYVILLE, PA 19369

\$100.00

Grading Permit # _____
Submission Date: _____

GRADING, EROSION & SEDIMENTATION CONTROL PERMIT APPLICATION

OWNER: _____

ADDRESS: _____ PHONE: _____
FAX: _____
EMAIL: _____

APPLICANT: _____
(If different from Owner)
ADDRESS: _____ PHONE: _____
FAX: _____
EMAIL: _____

Property Location (If different from above):
Address: _____
Lot Number: _____ Tax Parcel Number: _____

THREE SETS OF PLANS REQUIRED:
Title: _____ Date: _____
Registered Engineer / Surveyor: _____

Description of work to be performed: _____

Square Feet or Acres of Disturbance: _____

Other Properties: Does work back up to discharge water on, or affect any other property in any way?
Yes _____ No _____
If yes, list and describe other properties affected and to what extent: _____

Method of maintaining and protection existing facilities: _____

Anticipated date to begin work: _____ Anticipated date to complete work: _____

Permit shall expire twelve (12) months from date of approval, unless a Permit Extension is requested and approved prior to the expiration date.

The applicant is responsible for all professional consultant fees associated with the review of any plans, and for construction surveillance fees for site inspections associated with this grading permit.

Owner's Signature: _____ Date: _____

Applicant's Signature: _____ Date: _____

Township Approval: _____ Date: _____