

## Grading Permit Application

Date Received:

|  |            |       |            |
|--|------------|-------|------------|
| Job Address  |            |       | Suite      |
| Property Owner/Tenant Name   |            |       | Phone      |
| Contractor Name  |            |       | Phone      |
| Address  | City/State | Zip   | Alt. Phone |
| <input type="checkbox"/> Commercial <input type="checkbox"/> Residential <input type="checkbox"/> Other  |            |       |            |
| Permit Fee Based on Cubic Yards  |            |       |            |
| Enter Cubic Yards (Cut)  |            | Total | \$ -       |
| Will any trees be cleared from property? <i>(If yes, a Tree Removal permit must be obtained.)</i> <input type="checkbox"/> Yes <input type="checkbox"/> No   |            |       |            |
| If this project has an excavation depth in excess of five (5) feet, detailed plans and specifications of the project must be submitted, signed and sealed by a registered engineer or architect.   |            |       |            |
| The issuance or granting of a permit shall not be construed to be a permit for, or an approval of, any violation of any of the provisions of this code or of any other ordinance of the City of Bedford. Permits obtained shall not give authority to violate health and safety violations. The issuance of a permit based on construction documents and other data shall not prevent the building official from requiring the correction of errors in the construction documents and other data. I have read the completed application and know the same is true and correct and hereby agree that if a permit is issued all provisions of the City Ordinances and State Laws will be complied with whether herein specified or not. I agree to comply with all property restrictions. I am the owner of the property or the duly authorized agent. |            |       |            |
| <input type="checkbox"/> Submit application and pay by cash, check or credit card in person.<br><input type="checkbox"/> One time charge on my credit card. Application by fax, mail or email. (credit card payment form attached)   |            |       |            |
| Permission is hereby granted to enter the premises and make all inspections  |            |       |            |
| Applicant Name (Print)   |            |       |            |
| Applicant Signature  |            |       | Date:      |

Office Use

|                          |       |
|--------------------------|-------|
| Approval to Issue Permit | Date: |
|--------------------------|-------|