

Land Clearing Permit Application Form

This form shall be submitted with each application for a land clearing permit.

CONTACT INFORMATION

Applicant	Property Owner (if different)
Name	Name
Street Address	Street Address
City, State Zip	City, State Zip
Phone	Phone
Fax	Fax
E-mail	 E-mail
Architect (if different)	Engineer/Land Surveyor (if different)
Name	Name
Street Address	Street Address
City, State Zip	City, State Zip
Phone	Phone
Fax	
E-mail	 E-mail

Property ID #				
Site Address				
Legal Description _	(Subdivision)	(Lot)	(Block)	
Current Zoning	(Subdivision)		(Бюск)	
Present Use of Pro	perty			
Proposed Use of th	ne Property			
Total Area of Site _				

Narrative	
☐ Work description	
Map Sheet General Requirements	
 □ 24 in. x 36 in. sheet size □ Largest engineering scale possible □ Key map □ North arrow □ Title block with name of applicant and da 	te of submittal
Required Information	
 □ Demarcation of property lines with dimer □ Dimensions of the property to be cleared □ Access points to public roads 	state arborist, landscape architect, or landscape contractor nsions type name), certify with my signature below that the s complete, true, and correct, to the best of my knowledge.
Signature of Applicant	Date