

APPLICANT'S SIGNATURE

## PERMIT No. GR-\_\_\_\_ - \_\_\_\_ - \_\_\_\_ GRADING PERMIT APPLICATION

Application Date:		
City of Berkeley to c for such period as sp	etter of credit or other improvement scover all costs of improvements, land	security in an amount deemed sufficient by the scaping, and maintenance of improvements ngineering and inspection costs to cover the site.
FIRM RESPONSIBLE FOR GI	RADING:	
BUSINESS ADDRESS:		PHONE:
CITY/STATE/ZIP:		FAX:
LIST TWO (2) PERSONS, ON	N CALL 24 HOURS PER DAY, WHO A	ARE RESPONSIBLE FOR THIS WORK.
NAME:	PHONE:	EMAIL:
NAME:	PHONE:	EMAIL:
	LOCATION OF GRAD	
	NewAltering (	
	f no, explain:	
Requested working time for pro	ject is days. Beginning or	n:
I certify that I have read, have u standards for completions.	nderstood and will comply with the requ	direments of the City of Berkeley Missouri

Permit Fee: \$	Date Issued:	Employee Initials

APPROVED FOR THE CITY

**DATE** 

DATE