

Grading Permit Application

Clackamas County 150 Beavercreek Road, Oregon City, OR 97045 Phone: (503) 742-4400, FAX: (503) 742-4741

Internet address: www.clackamas.us

| OFFICE USE ONLY | | | | |
|--------------------|-------------|--|--|--|
| Date received: | Permit no.: | | | |
| Project no.: | Other: | | | |
| Land use approval: | | | | |

| JOB SITE INFORMATION | | | | | |
|---|---------------------|-------------|--|---|--|
| Job Address: | | | | | |
| Nearest Cross Street: | | | | | |
| Legal Description: | | | | | |
| Project Name: | | | | | |
| DESCRIPTION OF WORK | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | ON NEW | | | DECLUDED DATA | |
| OWNER | | | | REQUIRED DATA | |
| Name: | | | | Lot Size: | |
| Mailing address: City | | State: | ZIP: | | |
| Phone: | Fax: | | nail: | Cubic Yards of Material in Excavation | |
| Owner's representative: | | | | Colin Vanda «CMaraial | |
| Phone: | Fax: E-mail: | | nail: | Cubic Yards of Material in Backfill | |
| | CONTRACTOR | | | Sewage Disposal System | |
| Name: | | | | | |
| Address: | | | | ☐ Septic ☐ Sewer | |
| City State | | State: | ZIP: | Submit 3 sets of plans & one geotechnical report (if applicable). | |
| Phone: | Fax: E-mail: | | nail: | Plans shall include the following: | |
| CCB no.: | City/metro lic. no. | | | To-scale plot plan with grade contours showing existing and | |
| Notice: All contractors and subcontractors are required to be licensed with the Construction Contractors Board of the State of Oregon under provisions of ORS 701 and may be required to be licensed in the jurisdiction where work is being performed, or, the applicant is exempt from licensing, the following reason: | | | ate of Oregon under licensed in the juris- licant is exempt from | proposed development, including features such as proposed and existing buildings, roads, utilities, septic system or septic approved location, drainage ways, and rivers. 2. Sufficient cross section to accurately represent proposed earthwork in excavation and/or backfill. 3. Calculation of quantity of work in excavation and/or backfill. | |
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| I hereby certify I have read and examined this application and know the same to be true and correct. All provisions of laws and ordinances governing this type of work will be complied with whether specified herein or not. | | | aws and ordinances whether specified | Minimum Fee\$ | |
| Authorized signature:Date: | | | Date: | TOTAL\$ | |