



APPLICATION FOR GRADING/LANDSCAPE PERMIT

APPLICATION NO.: PR _____ (FOR OFFICE USE ONLY)

PLEASE FILL OUT THE FOLLOWING INFORMATION

JOB ADDRESS: _____ UNIT NO.: _____

CITY/LOCALITY: _____ CROSS – ST: _____ ASSESSOR INFORMATION NO.: ____-- ____-- ____

OWNER'S NAME: _____ (LAST NAME/BUSINESS NAME) _____ (FIRST) _____ (MI) OWNER/BUILDER: YES _____ NO _____
(IF YES, COMPLETE OWNER/BUILDER DECLARATION)

ADDRESS: _____ PHONE (____) _____ Ext. _____

TENANT: _____ (LAST NAME/BUSINESS NAME) _____ (FIRST) _____ (MI)

ADDRESS: _____ PHONE (____) _____ Ext. _____

APPLICANT: _____ (LAST NAME/BUSINESS NAME) _____ (FIRST) _____ (MI)

ADDRESS: _____ PHONE (____) _____ Ext. _____

CONTRACTOR: _____ (LAST NAME/BUSINESS NAME) _____ (FIRST) _____ (MI) LIC. NO.: _____ CLASS: _____

ADDRESS: _____ PHONE (____) _____ Ext. _____

ARCH/ENG: _____ (LAST NAME/BUSINESS NAME) _____ (FIRST) _____ (MI) LIC. NO.: _____ CLASS: _____

ADDRESS: _____ PHONE (____) _____ Ext. _____

WORK DESCRIPTION: _____

CUBIC YARD HANDLED: _____ LANDSCAPE AREA: _____ SQ.FT. CHECK IF SUPERVISED GRADING: _____

WATER PURVEYOR NAME: _____

THIS DOCUMENT IS TWO-SIDED

FOR BUILDING AND SAFETY USE ONLY

SUPRV'D GRADING: _____ MAP NBR: _____

STATE HIGHWAY: _____ USE ZONE: _____ CUBIC YARDS HANDLED: _____

SPECIAL CONDITION _____

THIS APPLICATION IS ALSO ASSOCIATED WITH THE FOLLOWING PROPERTIES:

TRACT	LOT	TRACT	LOT	TRACT	LOT	TRACT	LOT	TRACT	LOT	TRACT	LOT
_____	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____

PRINCIPAL: _____
(LAST NAME/BUSINESS NAME) (FIRST NAME) (M.I.)

OR

SUBDIVIDER: _____
(LAST NAME/BUSINESS NAME) (FIRST NAME) (M.I.)

TYPE/INSTRUMENT/NUMBER: _____

ORIGINAL \$: _____

RCV DATE: _____

CITY'S TRANSPARENCY POLICY FOR CONTRACTORS:

Do you have any negative disciplinary actions from the CSLB for the past five years?

CASE NUMBER AND REASONS: _____

PROPERTY OWNER SIGNATURE: _____