GRADING & FILL PERMIT

CITY OF SEASIDE BUILDING PLANNING 503-738-7100

Project:		Plan Review#:
		Application Date:
TaxMap:	**Tax Lot:**	**Permit#:**
		Issue Date:
Subdivision:	**Lot:** / **Block:**	Assoc. Permits:

FOR DEPARTMENT USE ONLY

JOB SITE INFORMATION	OWNER INFORMATION
Address:	Name:
City: State:	Address:
Directions	Cty/St/Zip:
to jobsite:	Phone: FAX:

I am the property owner hiring a construction contractor	License #:		Expires:
I am licensed with the Building Codes Division	License #:		Expires:
I am registered with the Construction Contractors Board	Registration #:		Expires:
Above contractor's Seaside Business License	License #:		Expires:
I am the property owner **doing my own work**			

Contractor's Name:		
Address:		
Telephone:	Cell Phone:	Fax:
Project Engineer:		
Address:		
Telephone:	Cell Phone:	Fax:

ZONING		FLOOD PLAIN	SANITATION
Zone:		Flood: Req.Elev.	City Sewer [ ] Septic [ ]
Initials		Initials	Initials

	SUM
(1) Grading & Fill Permit Fees	
a. Base Permit Fee	0.00
Additional Yards Fee	0.00
Enter total of fees above	**0.00**
(2) Plan Review Fees	
a. Plan Review	0.00
Enter total of fees above	**0.00**
(3) Planning Fees - ☐ General Development ☐ Flood Plain ☐ Erosion Control ☐ Hazard Mitigation Plan	0.00
(4) Fees Paid In Advance **Amt.** $0.00 **Rec.#** **Date:**	0.00
GRAND TOTAL	**$0.00**

APPLICANT'S SIGNATURE:	**DATE SIGNED:**
APPLICANT'S NAME (please print):	